Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
DISTRICT OF PUERTO RICO, SAN JUAN DIVISION	_	
Case number (if known)	_ Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	⊠ Chapter 13	☐ Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

06/24

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Identify Yourself About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): Your full name Write the name that is on NOEL **IOVASKA** your government-issued First name First name picture identification (for example, your driver's **ANTONIO** license or passport). Middle name Middle name Bring your picture SANTIAGO FELICIANO **CLAUDIO VARGAS** identification to your Last name and Suffix (Sr., Jr., II, III) Last name and Suffix (Sr., Jr., II, III) meeting with the trustee. All other names you have used in the last 8 years Include your married or AKA NOEL A. SANTIAGO FELICIANO maiden names and any AKA IOSVASKA CLAUDIO AKA NOEL SANTIAGO FELICIANO assumed, trade names and AKA IOVASKA C. VARGAS AKA NOEL SANTIAGO doing business as names. AKA IOVASKA CLAUDIO AKA CHISPI BURGERS Do NOT list the name of any separate legal entity such as a corporation, partnership, or LLC that is not filing this petition. Only the last 4 digits of your Social Security number or federal xxx-xx-0627 xxx-xx-9389 Individual Taxpayer Identification number (ITIN)

4. Your Employer Identification Number (EIN), if any.		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
		EIN	EIN			
5. Where you live		URB LOS ANGELES 6 CALLE ACUARIO Carolina, PR 00979	If Debtor 2 lives at a different address:			
		Number, Street, City, State & ZIP Code Carolina County If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. URB LOS ANGELES 6 CALLE ACUARIO Carolina, PR 00979 Number, P.O. Box, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code County If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. Number, P.O. Box, Street, City, State & ZIP Code			
6.	Why you are choosing this district to file for bankruptcy	Check one: ☐ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one: ☐ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)			

Debtor 1 NOEL ANTONIO SANTIAGO FELICIANO
Debtor 2 IOVASKA CLAUDIO VARGAS Case number (if known)

7.	The chapter of the Bankruptcy Code you are				ch, see <i>Notice Required by</i> 1 and check the appropriat	11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy e box.			
	choosing to file under		Chapter 7						
			Chapter 11						
			Chapter 12						
		\boxtimes	Chapter 13						
8.	How you will pay the fee		about how yo	u may pay. Typically, attorney is submitting	entire fee when I file my petition. Please check with the clerk's office in your local court for more details may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money ttorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with				
					ents. If you choose this option	on, sign and attach the Application for Individuals to Pay			
			The Filing Fe	e in Installments (Offi	cial Form 103A).				
			but is not requal applies to you	uired to, waive your four four four four family size and you	ee, and may do so only if your are unable to pay the fee in	n only if you are filing for Chapter 7. By law, a judge may, our income is less than 150% of the official poverty line that n installments). If you choose this option, you must fill out cial Form 103B) and file it with your petition.			
9.	Have you filed for bankruptcy within the last 8 years?	⊠ N □ Y							
			District		When	Case number			
			District		When	Case number			
			District		When	Case number			
10.	Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	M ⊠ Y □							
			Debtor			Relationship to you			
			District		When	Case number, if known			
			Debtor	-		Relationship to you			
			District		When	Case number, if known			
11.	Do you rent your residence?	⊠ N							
		□ Y	′		an eviction judgment agains	st you?			
				No. Go to line 12.					
				Yes. Fill out <i>Initial St</i> this bankruptcy petit		Judgment Against You (Form 101A) and file it as part of			

NOEL ANTONIO SANTIAGO FELICIANO Debtor 1 IOVASKA CLAUDIO VARGAS Debtor 2 Case number (if known) Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor ⊠ No. of any full- or part-time Go to Part 4. business? ☐ Yes. Name and location of business A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of Bankruptcy Code, and operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure are you a small business in 11 U.S.C. § 1116(1)(B). debtor? For a definition of small ☑ No. I am not filing under Chapter 11. business debtor, see 11 ☐ No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy U.S.C. § 101(51D). ☐ Yes. I am filing under Chapter 11, I am a small business debtor according to the definition in the Bankruptcy Code, and I do not choose to proceed under Subchapter V of Chapter 11. ☐ Yes. I am filing under Chapter 11, I am a small business debtor according to the definition in the Bankruptcy Code, and I choose to proceed under Subchapter V of Chapter 11. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention ⊠ No. 14. Do you own or have any property that poses or is ☐ Yes. alleged to pose a threat What is the hazard? of imminent and identifiable hazard to public health or safety? Or do you own any property that needs If immediate attention is immediate attention? needed, why is it needed? For example, do you own perishable goods, or livestock that must be fed, Where is the property?

or a building that needs urgent repairs?

Number, Street, City, State & Zip Code

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

 I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

	NOEL ANTONIO SANTIAGO FELICIANO IOVASKA CLAUDIO VARGAS	Case number (if known)	
art 6:	Answer These Questions for Reporting Purposes		

16.	What kind of debts do	16a.				defined in 11 U.S.C. § 101(8) as "incurred by an	
	you have?		individual primarily for a personal, ☐ No. Go to line 16b.	iaililly, or flouse	mola parpose.		
			☐ Not. Go to line 105.				
		16b.	Are your debts primarily busines money for a business or investmer				
			☐ No. Go to line 16c.				
			☐ Yes. Go to line 17.				
		16c.	State the type of debts you owe the	at are not consu	ımer debts or busi	ness debts	
17.	Are you filing under Chapter 7?	⊠ No.	I am not filing under Chapter 7. Go to line 18.				
	Do you estimate that after any exempt property is excluded and	☐ Yes.	are paid that funds will be available			roperty is excluded and administrative expenses ors?	
	administrative expenses are paid that funds will		□ No				
	be available for		Yes				
	distribution to unsecured creditors?						
18.	How many Creditors do	☑ 1-49		1,000-5,000	0	<u>25,001-50,000</u>	
	you estimate that you owe?	50-99		5001-10,00 10,001-25,0		☐ 50,001-100,000 ☐ More than100.000	
	owe?	☐ 100-19 ☐ 200-99		□ 10,001-25,0	000	☐ More than 100,000	
19.	How much do you	□ \$0 - \$		\$1,000,001		\$500,000,001 - \$1 billion	
	estimate your assets to be worth?		01 - \$100,000 001 - \$500,000		1 - \$50 million 1 - \$100 million	\$1,000,000,001 - \$10 billion \$10,000,000,001 - \$50 billion	
			001 - \$1 million		01 - \$500 million	☐ More than \$50 billion	
20.	How much do you	□ \$0 - \$5		□ \$1,000,001		□ \$500,000,001 - \$1 billion	
	estimate your liabilities to be?		001 - \$100,000 001 - \$500,000		1 - \$50 million 1 - \$100 million	□ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion	
			001 - \$1 million		01 - \$500 million	☐ More than \$50 billion	
Par	7: Sign Below						
For	you	I have ex	amined this petition, and I declare u	ınder penalty of	perjury that the inf	formation provided is true and correct.	
		If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.					
		If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).					
		I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.					
			I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 151 and 3571				
		/s/ NOEI	L ANTONIO SANTIAGO FELIC			CLAUDIO VARGAS	
			NTONIO SANTIAGO FELICIAN e of Debtor 1	10	IOVASKA CLA Signature of Del	AUDIO VARGAS otor 2	
		Executed on October 3, 2024 Executed on October 3, 2024 MM / DD / YYYYY					

Debtor 1	NOEL ANTONIO SANTIAGO FELICIANO
Debtor 2	IOVASKA CLAUDIO VARGAS

Case number (if known)	

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ ROSANA MORENO RODRIGUEZ	Date	October 3, 2024
Signature of Attorney for Debtor		MM / DD / YYYY
ROSANA MORENO RODRIGUEZ		
Printed name		
MORENO LAW OFFICE LLC		
Firm name		
PO Box 679		
Trujillo Alto, PR 00977		
Number, Street, City, State & ZIP Code		
Contact phone (787) 530-1998	Email address	rmoreno@morenolawpr.com
PR		
Bar number & State	-	

Fill	in this information to identify your case:		
Deb	otor 1 NOEL ANTONIO SANTIAGO FELICIANO		
	First Name Middle Name Last Name		
	tor 2 IOVASKA CLAUDIO VARGAS use if, filing) First Name Middle Name Last Name		
(Оро			
Uni	ted States Bankruptcy Court for the: DISTRICT OF PUERTO RICO, SAN JUAN DIVISION		
	e number		
(if kn	own)		eck if this is an ended filing
		ann	ended ming
	ficial Form 106Sum		
<u>Su</u>	mmary of Your Assets and Liabilities and Certain Statistical Information		12/15
info	s complete and accurate as possible. If two married people are filing together, both are equally responsible formation. Fill out all of your schedules first; then complete the information on this form. If you are filing amend original forms, you must fill out a new <i>Summary</i> and check the box at the top of this page.		
Par	11: Summarize Your Assets		
			assets
		Value	e of what you own
1.	Schedule A/B: Property (Official Form 106A/B)		40.000.00
	1a. Copy line 55, Total real estate, from Schedule A/B	\$_	19,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$_	56,326.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$_	75,326.00
Par	2: Summarize Your Liabilities		
		Your	· liabilities
			unt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	33,123.00
		Ψ_	00,120.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$_	68.15
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	Φ.	87,757.58
	3b. Copy the total claims from Part 2 (nonphonty unsecured claims) from line of or Schedule E/F	\$ _	07,757.50
	Your total liabilities	\$	120,948.73
Par	3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I)		
	Copy your combined monthly income from line 12 of Schedule I	\$ _	2,956.49
5.	Schedule J: Your Expenses (Official Form 106J)		
	Copy your monthly expenses from line 22c of Schedule J	\$	2,506.49
Par	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for hankruntey under Chanters 7, 14, or 122		
0.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other	schedules.
7.			
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a	personal	, family, or household
	purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159. Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this	hov and (submit this form to the
	court with your other schedules.	ox and s	אווו טו ווווטו פוווו זוווועטיפ

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$_____4,467.89

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	68.15
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as		
priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	68.15

Eill	in this inform	mation to identify	Vour oppo and t	bio filip				
		mation to identify						
Deb	tor 1	NOEL ANTO	NIO SANTIAGO Midd	J FELIC le Name	Last Name			
Deb	tor 2	IOVASKA CI	AUDIO VARGA					
	use, if filing)	First Name		le Name	Last Name			
Unit	ed States Ba	inkruptcy Court for	the: DISTRICT	OF PUE	ERTO RICO, SAN JUAN DIVISION			
Cas	e number _							Check if this is an amended filing
Off	ficial Fo	rm 106A/E	}					
_		e A/B: Pi	-					12/15
think infori	it fits best. It mation. If more ver every ques	Be as complete and e space is needed, stion.	accurate as possi attach a separate s	ble. If two	only once. If an asset fits in more than or o married people are filing together, both ar nis form. On the top of any additional pages Estate You Own or Have an Interest In	e equally responsib	le for supp	lying correct
1. D	□ No. Go t			any resi	dence, building, land, or similar property?			
1.1	6 CALLE A	ANGELES ACUARIO if available, or other des	cription	What	s is the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative	the amount of any	secured cl	s or exemptions. Put aims on <i>Schedule D:</i> Secured by Property.
	Carolina	PR	00979		Manufactured or mobile home	Current value of entire property?		Current value of the portion you own?
	City	State	ZIP Code		Investment property	\$95,00	0.00_	\$19,000.00
					Timeshare	Describe the nat	ure of your	ownership interest
				_	Other has an interest in the property? Check one	(such as fee sim a life estate), if k 1/5 INHERITA	nown.	ey by the entireties, or GHT OVER
					Debtor 1 only	DEBTOR.		
	Carolina				Debtor 2 only			
	County				Debtor 1 and Debtor 2 only	01	•	
				\boxtimes	At least one of the debtors and another	(see instruction		inity property
					r information you wish to add about this ite erty identification number:	m, such as local		
				ROO GRA FAT	SCRIPTION: 3 BEDROOMS, 1 BATH DM, BALCONY & GARAGE. ANDPARENTS HAVE 5 HEIRS INCI HER ALIVE, MOTHER DECEASED BTOR IS OLY HEIR OF MOTHER. D	LUDING DEBTO). 5 HEIRS INCL	R'S MOT JDING D	THER'S. DEBTOR.
					your entries from Part 1, including an			\$19,000.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Debte Debte		ELICIANO	Case number (if known)
3. C	ars, vans, trucks, tractors, sport utility v	ehicles, motorcycles	
	No Yes		
3.1	Make: TOYOTA Model: C-HR	Who has an interest in the property? Check one ☐ Debtor 1 only	Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.
	Year: 2020 Approximate mileage: 41433 Other information:	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Current value of the entire property? Current value of the portion you own?
		☐ Check if this is community property (see instructions)	\$16,630.00 \$16,630.00
3.2	Make: <u>CAN-AM</u> Model: <u>RYKER 900</u>	Who has an interest in the property? Check one ☐ Debtor 1 only	Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.
	Year: 2021 Approximate mileage: Other information: \$4,988.00 AS PER VALUE	☐ Debtor 2 only ☑ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Current value of the entire property? Current value of the portion you own?
	KELLEY BLUE BOOK	☐ Check if this is community property (see instructions)	\$4,988.00 \$4,988.00
3.3	Make: INDIAN MOTORCYCLE Model: SCOUT BOBBER	Who has an interest in the property? Check one ☑ Debtor 1 only	Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.
	Year: 2021 Approximate mileage: Other information:	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Current value of the entire property? Current value of the portion you own?
	\$10,339.00 AS PER VALUE	☐ Check if this is community property (see instructions)	\$13,000.00 \$13,000.00
3.4	Make: CARGO Model: TRAILER	Who has an interest in the property? Check one ☐ Debtor 1 only	Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.
	Year: 2023 Approximate mileage: Other information:	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Current value of the entire property? Current value of the portion you own?
		☐ Check if this is community property (see instructions)	\$5,000.00 \$5,000.00
3.5	Make: MITSUBISHI Model: LANCER	Who has an interest in the property? Check one ☐ Debtor 1 only	Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.
	Year: 2014 Approximate mileage: 126592 Other information: \$4,389.00 AS PER VALUE KEEY	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Current value of the entire property? Current value of the portion you own?
	BLUE BOOK	☐ Check if this is community property (see instructions)	\$4,389.00 \$4,389.00
		nd other recreational vehicles, other vehicle tercraft, fishing vessels, snowmobiles, motorcy	
\boxtimes	,		

Debtor 1 Debtor 2		NIO SANTIAGO FELICIANO AUDIO VARGAS	Case number (if known)	
		the portion you own for all of your entries from Part 2, i ed for Part 2. Write that number here		\$44,007.00
Part 3:	escribe Your Perso	nal and Household Items		
		egal or equitable interest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
<i>Exam</i> _l □ No	ehold goods and oles: Major appliar s. Describe	ces, furniture, linens, china, kitchenware		
		HOUSEHOLD GOODS & FURNISHINGS		\$2,000.00
<i>Exam</i> _l ⊠ No		nd radios; audio, video, stereo, and digital equipment; comp phones, cameras, media players, games		ections; electronic devices
<i>Exam</i> _l ⊠ No		figurines; paintings, prints, or other artwork; books, pictures ons, memorabilia, collectibles	, or other art objects; stamp, coin, or	baseball card collections;
Exam _i <u>⊠</u> No	oment for sports a oles: Sports, photo musical instrus. Describe	graphic, exercise, and other hobby equipment; bicycles, poo	ol tables, golf clubs, skis; canoes and	d kayaks; carpentry tools;
10. Fire a Exan ☐ No ⊠ Yes	nples: Pistols, rifles	s, shotguns, ammunition, and related equipment		
		GLOCK 43 9MM		\$400.00
		RUGER SR22 .22		\$300.00
		FN HERSTAL FIVE SEVEN 5.7 X 28		\$1,300.00
		CENTURY ARMS WASR-10 7.62 X 39		\$700.00
		GLOCK .45 MOD 21		\$547.00
☐ No		othes, furs, leather coats, designer wear, shoes, accessories	5	\$500.00
□ No		welry, costume jewelry, engagement rings, wedding rings, h	eirloom jewelry, watches, gems, gol	
		SMALL JEWELRY		\$500.00

Debtor 1 Debtor 2	NOEL ANTON IOVASKA CLA	_	NTIAGO FELICIANO VARGAS	Case number (if known)	
<i>Exam</i> ⊠ No	farm animals ples: Dogs, cats, b Describe	irds, hor	ses		
⊠ No	•		-	oot already list, including any health aids you did not list	
				t 3, including any entries for pages you have attached	\$6,247.00
	escribe Your Financ wn or have any le		s quitable interest in a	ny of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
⊠ No	ples: Money you h	-	our wallet, in your hom	e, in a safe deposit box, and on hand when you file your petiti	on
<i>Exam</i> , □ No				nts; certificates of deposit; shares in credit unions, brokerage vith the same institution, list each. Institution name:	houses, and other similar
		17.1.	Checking	BPPR ACCESO POPULAR ACOOUNT xxxxx7395	\$0.00
		17.2.	Other financial account	PENFED REGULAR SHARES ACCOUNT xxxxxx5011. TO BE SURRENDERED	\$700.00
		17.3.	Checking	PENFED FREE CHECKING ACCOUNT xxxx7024	\$200.00
		17.4.	Checking	ORIENTAL BANK LIBRE ACCOUNT xxxxx1415	\$0.00
		17.5.	Checking	BPPR ACCESO POPULAR ACCOUNT xxxxx5049	\$100.00
<i>Exam</i> µ ⊠ No			cly traded stocks ent accounts with broke Institution or issuer na	erage firms, money market accounts me:	
and jo ⊠ No	oint venture		I interests in incorpor	rated and unincorporated businesses, including an intere	st in an LLC, partnership,

Official Form 106A/B

Debtor 1 Debtor 2	NOEL ANTONIO SANTIAGO FELICIANO IOVASKA CLAUDIO VARGAS	D	Case number (if known)	
	Name of entity:		% of ownership: %	
Negot Non-n ⊠ No	ernment and corporate bonds and other negotitiable instruments include personal checks, cashing the instruments are those you cannot transt. Give specific information about them lessuer name:	ers' checks, promissory notes, ar	d money orders.	
<i>Exam</i> □ No	ement or pension accounts ples: Interests in IRA, ERISA, Keogh, 401(k), 403 List each account separately. Type of account: 401(k)	B(b), thrift savings accounts, or ot Institution name: SALTCHUCK COMPANI	, , , , ,	5,072.00
Your s <i>Exam</i> ☑ No	rity deposits and prepayments share of all unused deposits you have made so th ples: Agreements with landlords, prepaid rent, pu		telecommunications companies, or others	
⊠ No	ities (A contract for a periodic payment of money	/ to you, either for life or for a nun	nber of years)	
26 U.S. ⊠ No	sts in an education IRA, in an account in a qua .C. §§ 530(b)(1), 529A(b), and 529(b)(1). 			
⊠ No	ss, equitable or future interests in property (oth Give specific information about them	her than anything listed in line	1), and rights or powers exercisable for your b	oenefit
<i>Exam</i> ⊠ No	nts, copyrights, trademarks, trade secrets, and ples: Internet domain names, websites, proceeds Give specific information about them		ements	
<i>Exam</i> ⊠ No	nses, franchises, and other general intangibles ples: Building permits, exclusive licenses, cooper. Give specific information about them		•	
Money or	property owed to you?		Current value portion you ov Do not deduct s claims or exem	wn? secured

Official Form 106A/B Schedule A/B: Property page 5

Debtor 2 IOVASKA CLAUDIO VARGA		Case number (if known)	
28. Tax refunds owed to you ⊠ No		· · · · · ·	
	em, including whether you already filed the retu	rns and the tax years	
			-
29. Family support Examples: Past due or lump sum alimon ☑ No ☐ Yes. Give specific information	y, spousal support, child support, maintenance,	divorce settlement, property set	tlement
Tes. Give specific information			
	L		
30. Other amounts someone owes you Examples: Unpaid wages, disability insur benefits; unpaid loans you ma No Yes. Give specific information	rance payments, disability benefits, sick pay, va ade to someone else		ation, Social Security
31. Interests in insurance policies Examples: Health, disability, or life insura No Yes. Name the insurance company of € Company no		neowner's, or renter's insurance eficiary:	Surrender or refund value:
 32. Any interest in property that is due you are the beneficiary of a living trust, someone has died. ☒ No ☐ Yes. Give specific information 	ou from someone who has died expect proceeds from a life insurance policy, o	r are currently entitled to receive	property because
33. Claims against third parties, whether Examples: Accidents, employment dispu ☑ No ☐ Yes. Describe each claim	or not you have filed a lawsuit or made a der tes, insurance claims, or rights to sue	mand for payment	
34. Other contingent and unliquidated cla ⊠ No □ Yes. Describe each claim	nims of every nature, including counterclaim	_	et off claims
35. Any financial assets you did not alrea ⊠ No □ Yes. Give specific information	dy list		
	ries from Part 4, including any entries for pa		\$6,072.00

Official Form 106A/B Schedule A/B: Property page 6

Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real esta 7. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. Yes. Go to line 38.	ate in Part 1.	Current value of the portion you own? Do not deduct secured
No. Go to Part 6.		portion you own?
		portion you own?
		claims or exemptions.
Accounts receivable or commissions you already earned		
□ No □ Yes. Describe		
9. Office equipment, furnishings, and supplies Examples: Business-related computers, software, modems, printers, copiers, fax machine	es, rugs, telephones, desks, c	hairs, electronic devices
□ No □ Yes. Describe		
D. Machinery, fixtures, equipment, supplies you use in business, and tools of your tra	ade	
□ No □ Yes. Describe		
. Inventory		
□ No □ Yes. Describe		
2. Interests in partnerships or joint ventures		
☐ No ☐ Yes. Give specific information about them Name of entity:	% of ownership:	
B. Customer lists, mailing lists, or other compilations No. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))?		
☐ No ☐ Yes. Describe		
Any business-related property you did not already list		
☐ No ☐ Yes. Give specific information		
45. Add the dollar value of all of your entries from Part 5, including any entries for pag	nes vou have attached	

page 7

Debtor 1 Debtor 2	NOEL ANTONIO SANTIAGO FELICIANO IOVASKA CLAUDIO VARGAS	Case number (if known)	
	escribe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interc you own or have an interest in farmland, list it in Part 1.	· -	
⊠ No.	ou own or have any legal or equitable interest in any farm- or commercial fish. Go to Part 7.	hing-related property?	
∐ Yes	s. Go to line 47.		Current value of the portion you own? Do not deduct secured claims or exemptions.
47. Farm <i>Exam</i>	animals ples: Livestock, poultry, farm-raised fish		
☐ No ☐ Yes.			
48. Crop	s—either growing or harvested		
☐ No ☐ Yes.	. Give specific information		
49. Farm	and fishing equipment, implements, machinery, fixtures, and tools of trade		
☐ No ☐ Yes			
_	and fishing supplies, chemicals, and feed		
∐ No ∐ Yes.			
51. Any f	farm- and commercial fishing-related property you did not already list		
☐ No ☐ Yes.	. Give specific information		
	the dollar value of all of your entries from Part 6, including any entries for pa Part 6. Write that number here		
Part 7:	Describe All Property You Own or Have an Interest in That You Did Not List Above		
<i>Exam</i> ⊠ No	ou have other property of any kind you did not already list? ples: Season tickets, country club membership Give specific information		
54. Add	the dollar value of all of your entries from Part 7. Write that number here		\$0.00

Case number (if known)

Part	8: List the Totals of Each Part of this Form				
55.	Part 1: Total real estate, line 2				\$19,000.00
56.	Part 2: Total vehicles, line 5		\$44,007.00		
57.	Part 3: Total personal and household items, line 15		\$6,247.00		
58.	Part 4: Total financial assets, line 36		\$6,072.00		
59.	Part 5: Total business-related property, line 45		\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52		\$0.00		
61.	Part 7: Total other property not listed, line 54	+	\$0.00		
62.	Total personal property. Add lines 56 through 61	_	\$56,326.00	Copy personal property total	\$56,326.00
63.	Total of all property on Schedule A/B. Add line 55 + line 62			_	\$75,326.00

Official Form 106A/B Schedule A/B: Property page 9

						_	
Fill	l in this informa	ation to identify your case	:				
De	btor 1	NOEL ANTONIO SAN					
_		First Name	Middle Name	L	ast Name		
	btor 2 ouse if, filing)	IOVASKA CLAUDIO V. First Name	ARGAS Middle Name	L	ast Name		
l Im	itad Ctatas Banl	crumtory Count for the DIS	STRICT OF RUEDTO RIC	0 0/	ANI ILIANI DIVICIONI		
Un	ited States Bank	kruptcy Court for the: DIS	STRICT OF PUERTO RIC	U, SF	AN JUAN DIVISION		
	se number						Check if this is an amended filing
\sim 1	ficial Fam	10CC					
	fficial For			_	_		
S (1/2:		C: The Prop	erty You Cla	im	as Exempt		
he 1ee	property you list	ted on <i>Schedule A/B: Prope</i> attach to this page as many	erty (Official Form 106A/B)	as yo	ther, both are equally responsible foour source, list the property that you age as necessary. On the top of any	claim as ex	empt. If more space is
spe any un exe	cific dollar amo applicable sta ds—may be un mption to a pa	ount as exempt. Alternativ tutory limit. Some exempt limited in dollar amount. I	vely, you may claim the f tions—such as those for However, if you claim an	ull fa heal exen	ount of the exemption you claim. ir market value of the property be th aids, rights to receive certain be nption of 100% of fair market valuder determined to exceed that amoun	eing exempt benefits, an ue under a l	ted up to the amount of d tax-exempt retirement aw that limits the
Pa	rt 1: Identify	the Property You Claim a	s Exempt				
1.	Which set of e	exemptions are you claimi	ng? Check one only, ever	ı if vo	our spouse is filing with you.		
		iming state and federal non	,	•	J.S.C. § 522(b)(3)		
	You are cla	iming federal exemptions.	11 U.S.C. § 522(b)(2)				
2.	For any prope	erty you list on Schedule A	A/B that you claim as exe	mpt,	fill in the information below.		
		n of the property and line on	Current value of the	• •	ount of the exemption you claim	Specific la	ws that allow exemption
		nat lists this property	portion you own Copy the value from Schedule A/B	portion you own Copy the value from Check only one box for each exemption.			
	URB LOS AN	IGELES	\$19,000.00	\boxtimes	\$17,546.80	11 U.S.C	c. § 522(d)(1)
	6 CALLE ACI 00979	UARIO, Carolina, PR	φ19,000.00		100% of fair market value, up to any applicable statutory limit	11 0.0.0	. 3 022(4)(1)
	BEDROOMS ROOM, DINII GARAGE. GRANDPARI INCLUDING FATHER ALI DECEASED.	nty DESCRIPTION: 3 , 1 BATHROOM, LIVING NG ROOM, BALCONY 8 ENTS HAVE 5 HEIRS DEBTOR'S MOTHER'S. VE, MOTHER 5 HEIRS INCLUDING EBTOR IS OLY HEIR OF	k.				
		EBTOR LIVES THE					
		M RYKER 900	\$4,988.00	\boxtimes	\$4,988.00	11 U.S.C	c. § 522(d)(2)
	\$4,988.00 AS BLUE BOOK	S PER VALUE KELLEY			100% of fair market value, up to		
	Line from Sche				any applicable statutory limit		
	2023 CARGO	TRAILER	\$5,000.00	\boxtimes	\$5,000.00	11 U.S.C	c. § 522(d)(5)
	Line from Sche	edule A/B: 3.4			100% of fair market value, up to		- ,,,,
					any applicable statutory limit		

Debtor 1 NOEL ANTONIO SANTIAGO FELICIANO

IOVASKA CLAUDIO VARGAS Debtor 2 Case number (if known) Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B 2014 MITSUBISHI LANCER 126592 11 U.S.C. § 522(d)(2) \$3,912.00 \$4,389.00 \boxtimes 100% of fair market value, up to \$4,389.00 AS PER VALUE KEEY BLUE any applicable statutory limit **BOOK** Line from Schedule A/B: 3.5 2014 MITSUBISHI LANCER 126592 11 U.S.C. § 522(d)(5) \$4,389.00 \$477.00 \boxtimes miles 100% of fair market value, up to \$4,389,00 AS PER VALUE KEEY BLUE any applicable statutory limit **BOOK** Line from Schedule A/B: 3.5 **HOUSEHOLD GOODS &** \$2,000.00 11 U.S.C. § 522(d)(3) \$2,000.00 \boxtimes **FURNISHINGS** 100% of fair market value, up to Line from Schedule A/B: 6.1 any applicable statutory limit GLOCK .45 MOD 21 11 U.S.C. § 522(d)(5) \$547.00 \boxtimes Line from Schedule A/B: 10.5 100% of fair market value, up to any applicable statutory limit WEARING APPAREL 11 U.S.C. § 522(d)(3) \$500.00 \$500.00 \boxtimes Line from Schedule A/B: 11.1 100% of fair market value, up to any applicable statutory limit SMALL JEWELRY 11 U.S.C. § 522(d)(4) \$500.00 \$500.00 \boxtimes Line from Schedule A/B: 12.1 100% of fair market value, up to any applicable statutory limit PENFED FREE CHECKING ACCOUNT 11 U.S.C. § 522(d)(5) \$200.00 \$200.00 \boxtimes xxxx7024 100% of fair market value, up to Line from Schedule A/B: 17.3 any applicable statutory limit BPPR ACCESO POPULAR ACCOUNT 11 U.S.C. § 522(d)(5) \$100.00 \$100.00 \boxtimes xxxxx5049 100% of fair market value, up to Line from Schedule A/B: 17.5 any applicable statutory limit SALTCHUCK COMPANIES 401 PLAN 11 U.S.C. § 522(d)(12) \$5,072.00 \boxtimes \$5,072.00 Line from Schedule A/B: 21.1 100% of fair market value, up to any applicable statutory limit 3. Are you claiming a homestead exemption of more than \$189,050? (Subject to adjustment on 4/01/25 and every 3 years after that for cases filed on or after the date of adjustment.) \boxtimes Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? No П Yes

Fill in this inform	ation to identify you	r case:				
Debtor 1	NOEL ANTONIO	SANTIAGO FELICIANO				
	First Name	Middle Name Last Nam	пе			
Debtor 2	IOVASKA CLAUI					
(Spouse if, filing)	First Name	Middle Name Last Nam	ne			
United States Bar	kruptcy Court for the:	DISTRICT OF PUERTO RICO, SAN JU	AN DIV	/ISION		
Case number					□ Chock	if this is an
(ii kilowii)						ed filing
Official Form	106D					
		Who Have Claims Secu	red	by Property	v	12/15
Be as complete and needed, copy the Adknown). 1. Do any creditors	accurate as possible. If dditional Page, fill it out, have claims secured by	two married people are filing together, both an number the entries, and attach it to this form. your property? is form to the court with your other schedule.	re equa On the	lly responsible for su top of any additional	pplying correct informat pages, write your name	ion. If more space is
Part 1: List All	Secured Claims					
		nore than one secured claim, list the creditor separ	ratelv	Column A	Column B	Column C
for each claim. If m much as possible, lis	ore than one creditor has	a particular claim, list the other creditors in Part 2 al order according to the creditor's name.		Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.1 CRIM		Describe the property that secures the claim:		\$7,266.00	\$6,650.00	\$0.00
Creditor's Name		BACK TAXES OVER PROPERTY LOCATED AT URB LOS ANGELES, (CALLE ACUARIO, CAROLINA PR 00979.				
PO BOX 19		As of the date you file, the claim is: Check all the apply.	at			
	PR 00919-5387	Contingent				
Number, Street,	City, State & Zip Code	☐ Unliquidated ☐ Disputed				
Who owes the del	ot? Check one.	Nature of lien. Check all that apply.				
☐ Debtor 1 only ☐ Debtor 2 only		An agreement you made (such as mortgage c car loan)	or secure	ed		
Debtor 1 and De		☐ Statutory lien (such as tax lien, mechanic's lie	n)			
At least one of the Check if this cla		☐ Judgment lien from a lawsuit ☐ Other (including a right to offset)				
Date debt was incu	rred 2020-2024	Last 4 digits of account number 00	01			
2.2 FIRSTBAN	K	Describe the property that secures the claim:		\$16,843.00	\$16,630.00	\$213.00
Creditor's Name		AUTO LOAN OVER 2020 TOYOTA		ψ10,010.00	Ψ10,000.00	Ψ210.00
		C-HR				
PO Box 91	46					
		As of the date you file, the claim is: Check all the apply.	at			
	PR 00908-0146 City, State & Zip Code	☐ Contingent ☐ Unliquidated				
Who owes the del	ot? Check one	Disputed Nature of lien. Check all that apply.				
Debtor 1 only		☐ An agreement you made (such as mortgage of	or secure	ed		
Debtor 2 only	ht 0l	car loan)	.n\			
☑ Debtor 1 and De☐ At least one of the☐ Check if this class	e debtors and another	☐ Statutory lien (such as tax lien, mechanic's lie☐ Judgment lien from a lawsuit☐ Other (including a right to offset)	eri)			
community del	ot					

Date debt was incurred 12/2019

Last 4 digits of account number

6075

Deb	tor 1	NOEL ANT	ONIO SANTIA	GO FELICIAN	10		Case number (if	known)		
Deb	tor 2	First Name IOVASKA (Middle Na CLAUDIO VAR		Last Name					
		First Name	Middle Na	ame	Last Name					
2.3		RFORMANC	E				¢ 0.01	4.00	¢40.330.00	
		ANCE tor's Name			operty that secures the c 2021 INDIAN LE SCOUT	laim:	\$9,01	4.00	\$10,339.00	\$0.00
	Oak	BOX 5108 k Brook, IL 6 per, Street, City, St		As of the date y apply. Contingent Unliquidated Disputed	ou file, the claim is: Chec	k all that	J			
Who	owe	s the debt? Ch	neck one.	Nature of lien.	Check all that apply.					
	Debtor t least Check	2 only 1 and Debtor 2	ors and another	car loan) Statutory lien Judgment lier	t you made (such as morto (such as tax lien, mechani n from a lawsuit ng a right to offset)	, ,				
Date	debt	was incurred	4/2021	Last 4 di	gits of account number	993	3			
lf t	his is	the last page of	f your form, add	•	page. Write that number I	here:		\$33,123.00		
wr	ite tha	at number here	:				1 .	\$33,123.00	<i>)</i>	

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

								•		
Fill	in this inform	nation to identify your case:								
Del	otor 1	NOEL ANTONIO SANT	IAGO FELI	CIANO						
		First Name	Middle Name		Last Nam	е				
	otor 2	IOVASKA CLAUDIO VA								
(Spc	ouse if, filing)	First Name	Middle Name		Last Nam	е				
Uni	ted States Bar	nkruptcy Court for the: DIS	TRICT OF P	UERTO RIG	CO, SAN JU	AN DIVISI	ON			
Cas	se number									
(if kr	nown)								='	if this is an
									amend	ed filing
Off	ficial Form	106F/F								
		/F: Creditors Who	Have Ur	secure	d Claim	s				12/15
any Sche Sche left. nam	executory control edule G: Execut edule D: Credito Attach the Conf e and case num	I accurate as possible. Use Part racts or unexpired leases that c tory Contracts and Unexpired Leors Who Have Claims Secured b tinuation Page to this page. If you ber (if known). I of Your PRIORITY Unsecu	ould result in eases (Officia y Property. If ou have no in	a claim. Al I Form 106G more space	lso list execut). Do not inclu is needed, co	ory contractions or contractio	cts on Schedule A/B: editors with partially s t you need, fill it out,	Property (C secured clain number the	Official Folims that a entries in	rm 106A/B) and on re listed in the boxes on the
		rs have priority unsecured clair		11?						
	☐ No. Go to Pa ☐ Yes.	• •	no ugumot yo	u .						
2.	identify what typ possible, list the Part 1. If more t	priority unsecured claims. If a cope of claim it is. If a claim has both a claims in alphabetical order accordan one creditor holds a particular attorn of each type of claim, see the	priority and no rding to the cre claim, list the	onpriority amo editor's name other credito	ounts, list that e. If you have n ers in Part 3.	claim here a nore than tw	and show both priority a	and nonprior aims, fill out Priority	rity amount	ts. As much as nuation Page of Nonpriority
<u> </u>		TAMENTO DE HACIENDA				0627	¢60.4E	amount	¢60.4E	amount
2.1		TAMENTO DE HACIENDA editor's Name	Last 4	digits of acc	count number	0627	\$68.15		\$68.15	\$0.00
		JPTCY SECTON 424B 9024140	When	was the debt	t incurred?			_		
	San Jua	n, PR 00902-4140								
		reet City State Zip Code		=	file, the claim	is: Check a	all that apply			
	_	I the debt? Check one.	☐ Con	· ·						
	☐ Debtor 1 or	•		quidated						
	☐ Debtor 2 or	•	☐ Disp							
	_	nd Debtor 2 only	٠.		unsecured cla	aim:				
		e of the debtors and another nis claim is for a community	⊠ Tax		n other debts y					
	debt				or personal in	ury while yo	ou were intoxicated			
	S the claim s ☑ No ☐ Yes	ubject to offset?	□ Otn	er. Specify _	BACK TAX	ES IVU 2	2023			
Par	t 2: List Al	l of Your NONPRIORITY Un	secured Cla	ims						
3.	Do any credito	rs have nonpriority unsecured	claims agains	t you?						
	☐ No. You hav	re nothing to report in this part. Su	omit this form t	o the court w	ith your other	schedules.				
	☑ Yes.									
4.	unsecured clain	nonpriority unsecured claims in n, list the creditor separately for each problem a particular claim, list the	ich claim. For	each claim lis	sted, identify w	hat type of o	claim it is. Do not list cl	aims already	y included	in Part 1. If more

Total claim

Debtor Debtor	1 NOEL ANTONIO SANTIAGO FELICI 2 IOVASKA CLAUDIO VARGAS	ANO	Case number (if known)	
4.1	AMAZON BUSINESS PRIME CARD	Last 4 digits of account number	2008	\$86.02
7.1	Nonpriority Creditor's Name	Last 4 digits of account number		Ψ00.02
	PO BOX 1270	When was the debt incurred?		
	Newark, NJ 07101-1270			
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	□ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	⊠ No	☐ Debts to pension or profit-sharin		
	Yes	☑ Other. Specify Credit card	purchases 29.99%	
	BANCO POPULAR DE PUERTO			
4.2	RICO	Last 4 digits of account number	2365	\$6,267.00
	Nonpriority Creditor's Name			70,-01100
	BANKRUPTCY DEPARTMENT	When was the debt incurred?	9/2022	
	PO BOX 366818			
	San Juan, PR 00936-6818			
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	□ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	⊠ No	☐ Debts to pension or profit-sharin		
	Yes	☑ Other. Specify Credit card	purchases 33.94%	
1.0	CITI CARDS CBNA	Land A. Parker of Control of Control	3052	\$286.00
4.3	Nonpriority Creditor's Name	Last 4 digits of account number	3032	Ψ200.00
	PO Box 6500	When was the debt incurred?	12/2019	
	Sioux Falls, SD 57117-6500			
		As of the date you file, the claim	is: Chack all that apply	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you me, the claim	is. Check all that apply	
		□ Contingent		
	☐ Debtor 1 only ☐ Debtor 2 only	☐ Contingent☐ Unliquidated		
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	Student loans	a diamin.	
	debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	and the state of t	
	⊠ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	

☐ Yes

☑ Other. Specify <u>Credit card purchases</u>

	r 1 NOEL ANTONIO SANTIAGO FELIC r 2 <u>IOVASKA CLAUDIO VARGAS</u>	Case number (if known)	
4.4	CITI COSTCO	Last 4 digits of account number 5399	\$3.85
	Nonpriority Creditor's Name		
	PO Box 790046	When was the debt incurred?	
	Saint Louis, MO 63179-0046	As of the data you file the plains in Check all that apply	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one. ☐ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	⊠ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	☐ Other. Specify Credit card purchases 29.99%	
4.5	CONSUMER FINANCE/SYNCHRONY BANK	Last 4 digits of account number 4516	\$1,450.00
4.0	Nonpriority Creditor's Name	Last 4 digits of account number	ψ1,100.00
	PO BOX 71783	When was the debt incurred? 7/2023	
	Philadelphia, PA 19176-1783		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	☐ Debtor 1 only	☐ Contingent	
	Debtor 2 only	Unliquidated	
	☑ Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	Student loans	
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	⊠ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐Yes	☑ Other Specify Credit card purchases	
4.6	CRIM	Last 4 digits of account number	\$18,994.00
	Nonpriority Creditor's Name PO BOX 195387		
	San Juan, PR 00919-5387	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the drain is. Oncor all that apply	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	⊠ No	Debts to pension or profit-sharing plans, and other similar debts	
		BACK TAXES OVER PROPERTY LOCATED	
	_	AT URB LOS ANGELES, WJ18 CALLE	
	☐ Yes		

Debtoi Debtoi	1 NOEL ANTONIO SANTIAGO FELICIA 2 IOVASKA CLAUDIO VARGAS		Case number (if known)	
4.7	DISCOVER	Last 4 digits of account number	0904	\$4,351.31
	Nonpriority Creditor's Name PO Box 30939	When was the debt incurred?	8/2024	
	Salt Lake City, UT 84130-0939 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	□ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another	☐ Contingent ☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset? ☑ No	☐ Student loans☐ Obligations arising out of a sepa report as priority claims☐ Debts to pension or profit-sharin	ration agreement or divorce that you did not	
	Yes	☐ Other Specify Credit card		
4.8	FIRSTBANK	Last 4 digits of account number	2804	\$3,442.00
	Nonpriority Creditor's Name PO Box 9146	When was the debt incurred?	01/2020	
	San Juan, PR 00908-0146 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?	As of the date you file, the claim is Contingent Unliquidated Disputed Type of NONPRIORITY unsecured Student loans Obligations arising out of a sepa report as priority claims		
	⊠ No □ Yes	□ Debts to pension or profit-sharin☑ Other. Specify Credit card		
4.9	HOSPITAL PAVIA SANTURCE	Last 4 digits of account number	0627	\$15.00
	Nonpriority Creditor's Name DEPTO DE COBROS PO BOX 1137 San Juan, PR 00909	When was the debt incurred?	1/30/2024	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
	□ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No □ Yes	☐ Contingent ☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured ☐ Student loans ☐ Obligations arising out of a sepa report as priority claims ☐ Debts to pension or profit-sharin ☐ Other. Specify SERVICES	ration agreement or divorce that you did not	
	□ 169	M Guier Specify OLIVIOLO		-

Debtor 2	NOEL ANTONIO SANTIAGO FELICIA IOVASKA CLAUDIO VARGAS		Case number (if known)	
	HOSPITAL PAVIA SANTURCE Nonpriority Creditor's Name DEPTO DE COBROS PO BOX 1137	Last 4 digits of account number When was the debt incurred?	<u>0606</u> <u>12/2022</u>	\$15.00
-	San Juan, PR 00909 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes	As of the date you file, the claim Contingent Unliquidated Disputed Type of NONPRIORITY unsecured Student loans Obligations arising out of a sepa report as priority claims Debts to pension or profit-sharin Other. Specify	d claim: ration agreement or divorce that you did not	
	LUMA ENERGY Nonpriority Creditor's Name	Last 4 digits of account number	0627	\$1,000.00
-	PO Box 364267 San Juan, PR 00936-4267 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? Yes	When was the debt incurred? As of the date you file, the claim Contingent Unliquidated Disputed Type of NONPRIORITY unsecured Student loans Obligations arising out of a separeport as priority claims Debts to pension or profit-sharin Other. Specify UTILITIES	d claim: ration agreement or divorce that you did not	
	ORIENTAL BANK Nonpriority Creditor's Name PO Box 195115	Last 4 digits of account number When was the debt incurred?	<u>0001</u> <u>1/2023</u>	\$48,261.00
	San Juan, PR 00919-5115 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?	As of the date you file, the claim Contingent Unliquidated Disputed Type of NONPRIORITY unsecured Student loans Obligations arising out of a sepal report as priority claims		

⊠ No

☐ Yes

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

☑ Other. Specify PERSONAL LOAN

		TONIO SANTIAGO FELICIA CLAUDIO VARGAS	NO	Case nu	umber (if kno	own)	
4.1 3 PE	ENFED CR	REDIT UNION	Last 4 digits of account number	7024			\$3,551.40
	npriority Cred		Last 4 digits of account number	1021			Ψ0,001.10
PC	D Box 1432	2	When was the debt incurred?	1/202	23		
Δle	exandria \	VA 22313-1432					
		City State Zip Code	As of the date you file, the claim	is: Check	all that app	ly	
		he debt? Check one.					
	Debtor 1 only	/	☐ Contingent				
	Debtor 2 only		Unliquidated				
		Debtor 2 only	☐ Disputed				
		of the debtors and another sclaim is for a community	Type of NONPRIORITY unsecure ☐ Student loans	a ciaim:			
dek		ciain is for a community	☐ Obligations arising out of a sepa	aration an	reement or c	livorce that you did not	
ls t	the claim sub	oject to offset?	report as priority claims	aration ag	recinion of e	arvorce that you did not	
\boxtimes	No		☐ Debts to pension or profit-sharing	ng plans, a	and other sin	nilar debts	
	Yes		☑ Other. Specify Credit card	purcha	ses 17.99	%	
4.1 4 TR	RANSWOF	RLD SYSTEMS, INC.	Last 4 digits of account number	7387			\$35.00
	npriority Cred		•	4/000			
	0 VIRGINI	IA DR	When was the debt incurred?	1/202	24		
	JITE 514	aton DA 10024					
		gton, PA 19034 City State Zip Code	As of the date you file, the claim	is: Check	all that ann	lv	
		he debt? Check one.	710 or the date you me, the claim	10. 011001	t all triat app	· <i>y</i>	
	Debtor 1 only		☐ Contingent				
	Debtor 2 only		☐ Unliquidated				
\boxtimes	Debtor 1 and	Debtor 2 only	☐ Disputed				
	At least one	of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
		s claim is for a community	☐ Student loans				
del			☐ Obligations arising out of a sepa	aration ag	reement or c	livorce that you did not	
	t ne ciaim su t No	oject to offset?	report as priority claims	a plope	and ather sin	nilar dahta	
			☐ Debts to pension or profit-sharin			illiai debis	
	Yes		☑ Other. Specify MONEY CO	JLLEGI	IION		
Part 3:	List Others	to Be Notified About a Debt T	hat You Already Listed				
is trying to have more notified fo	to collect from the than one color any debts	m you for a debt you owe to some		Parts 1	or 2, then li	st the collection agency	here. Similarly, if you
			s. This information is for statistical	reporting	g purposes	only. 28 U.S.C. §159. Ad	ld the amounts for each
type or un	nsecured clai	im.				Total Claim	
	6a.	Domestic support obligations		6a.	\$	0.00	
Total claims	s				Ψ		-
from Part 1		Taxes and certain other debts yo	-	6b.	\$	68.15	-
	6c.	Claims for death or personal inju		6c.	\$	0.00	-
	6d.	Other. Add all other priority unsecu	red claims. Write that amount here.	6d.	\$	0.00	-
	6e.	Total Priority. Add lines 6a through	n 6d.	6e.	\$	68.15	
							_
	C.f	Student leans		6f		Total Claim	
Total claims	6f. s	Student loans		6f.	\$	0.00	-
from Part 2		Obligations arising out of a sepa			•	0.00	
	6h.	you did not report as priority clain Debts to pension or profit-sharin		6g. 6h.	\$	0.00	-
	OH.	Dones to pension or pront-snarm	g piano, ana omoi ominai acuto	OH.	\$	U.UU	

6i.

Other. Add all other nonpriority unsecured claims. Write that amount here.

0.00

87,757.58

Debtor 1	NOEL ANTONIO SANTIAGO FELICIANO
Debtor 2	IOVASKA CLAUDIO VARGAS

Case number (if known)

6j. Total Nonpriority. Add lines 6f through 6i.

j. \$ ______\$ 87,757.58

Debtor 1	NOEL ANTONIC	SANTIAGO FELICIANO	1	
	First Name	Middle Name	Last Name	
Debtor 2	IOVASKA CLAU	DIO VARGAS		
(Spouse if, filing)	First Name	Middle Name	Last Name	
Case number	ankruptcy Court for the:		RICO, SAN JUAN DIVISION	
(if known)				Check if this is an amended filing

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form. Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with	whom you have the r, Street, City, State and ZIP	e contract or lease Code	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	
2.3					
	Name				_
					<u> </u>
	Number	Street			
					<u></u>
	City		State	ZIP Code	
2.4					
	Name				
	- I	01 1			<u> </u>
	Number	Street			
	City		State	ZIP Code	_
2.5	City		Otate	Zii Gode	
2.0	Name				_
	Name				
	Number	Street			
					<u></u>
	City		State	ZIP Code	

Fill in this	s information to identify y	our case:			
Debtor 1	NOEL ANTON	IIO SANTIAGO FELICIA	NO		
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, fi		AUDIO VARGAS Middle Name	Last Name		
(Opodoo II, II	ing) Thorramo				
United Sta	ates Bankruptcy Court for t	he: DISTRICT OF PUEF	RTO RICO, SAN JUAN DIVIS	SION	
Case nun	nber				
(if known)					Check if this is an amended filing
					amondod ming
Officia	al Form 106H				
Sched	dule H: Your C	odebtors			12/15
people are fill it out, a your name	e filing together, both are and number the entries in e and case number (if kno	equally responsible for s the boxes on the left. At own). Answer every quest	upplying correct informati each the Additional Page to ion.	on. If more space is ne this page. On the top	e as possible. If two married eded, copy the Additional Page, of any Additional Pages, write
1. Do	you have any codebtors	? (If you are filing a joint ca	se, do not list either spouse	as a codebtor.	
⊠ No □ Ye					
			y property state or territory , Puerto Rico, Texas, Washir		states and territories include
_	o. Go to line 3. ss. Did your spouse, former	spouse, or legal equivalen	t live with you at the time?		
in lin Form	e 2 again as a codebtor o	nly if that person is a gua	rantor or cosigner. Make s	ure you have listed the	with you. List the person shown creditor on Schedule D (Official chedule E/F, or Schedule G to fill
	Column 1: Your codebtor Name, Number, Street, City, State			Column 2: The cred Check all schedules	itor to whom you owe the debt that apply:
3.1				☐ Schedule D, line	
3.1	Name			Schedule E/F, lin	e
				☐ Schedule G, line	
	Number Street			-	
	City	State	ZIP Code		
3.2				☐ Schedule D, line	
<u> </u>	Name			Schedule E/F, lin	e
				☐ Schedule G, line	
	Number Street			_	
	City	State	ZIP Code		

Filli	n this information to identify your ca	ase:						
Deb	otor 1 NOEL ANTO	NIO SANTIAGO FELIC	CIANO					
	otor 2 IOVASKA CL use, if filing)	AUDIO VARGAS						
Unit	ed States Bankruptcy Court for the	: DISTRICT OF PUERT	O RICO, SAN JUAN	DIVISION				
Cas (If kn	e number own)				□ A		d filing nt showing postpetitions of the following dat	
Of	ficial Form 106I				_	1M / DD/ Y		.
	chedule I: Your Inc	ome			IV	ז ושט ווווין	111	12/15
supp spou	s complete and accurate as possiblying correct information. If you use. If you are separated and you ch a separate sheet to this form. Describe Employment	are married and not filing with spouse is not filing with	ng jointly, and your the you, do not include	spouse is l de informa	living with tion abou	you, inclu t your spo	ude information abouse. If more space i	ut your s needed,
1.	Fill in your employment information.		Debtor 1			Debtor 2	or non-filing spous	e
	If you have more than one job, attach a separate page with information about additional employers.	Employment status				☐ Emplo	•	
	Include part-time, seasonal, or	Occupation	SUPERVISOR	ISOR		UNEMP	LOYED 3 MONTH	S
	self-employed work.	Employer's name	STRATAIR PUE	RTO RICC)			
	Occupation may include student or homemaker, if it applies.	Employer's address	1701 NW 63RD / BLDG 712 MIAMI, FL 33216					
		How long employed th	nere? 3 YEAR	lS .				
Par	Give Details About Mor	nthly Income						
	mate monthly income as of the dass you are separated.	i te you file this form. If yo	ou have nothing to rep	oort for any l	line, write \$	60 in the sp	ace. Include your non	-filing spouse
	u or your non-filing spouse have mo e space, attach a separate sheet to		mbine the information	n for all emp	ployers for	that perso	n on the lines below.	If you need
					For Del	btor 1	For Debtor 2 or non-filing spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,	•		2.	\$2	,889.80	\$	<u>)</u>
3.	Estimate and list monthly overt	ime pay.		3. +	\$	582.43	+\$0.00	<u>)</u>
4.	Calculate gross Income. Add lin	ne 2 + line 3.		4.	\$3,47	72.23	\$0.00	

IOVASKA CLAUDIO VARGAS Case number (if known)

						F	or Debtor 1			or Debtor on-filing s		
	Сору	line 4 here			4.	\$	3,472.23		\$	g	0.00	_
5.	List a	all payroll deductions:										
	5a.	Tax, Medicare, and Social S	Secu	rity deductions	5a.	\$	507.54		\$		0.00	
	5b.	Mandatory contributions for			5b.			_	\$		0.00	_
	5c.	Voluntary contributions for		•	5c.	\$		_	\$		0.00	_
	5d.	Required repayments of re			5d.			_	\$		0.00	_
	5e.	Insurance			5e.			_	\$		0.00	_
	5f.	Domestic support obligation	ns		5f.	\$		_	\$		0.00	_
	5g.	Union dues			5g.	\$		_	\$		0.00	_
	5h.	Other deductions. Specify:			5h.			_	- \$		0.00	_
6.	Add t	the payroll deductions. Add	lines	5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	622.41		\$_		0.00	-
7.	Calcu	ulate total monthly take-hom	е ра	y. Subtract line 6 from line 4.	7.	\$	2,849.82	_	\$_		0.00	_
8.	List a 8a.	profession, or farm Attach a statement for each	perty prope	ed: y and from operating a business, erty and business showing gross business expenses, and the total	8a.	\$	0.00	_	\$_		0.00	
	8b.	Interest and dividends			8b.	\$	0.00		\$		0.00	_
	8c.	regularly receive Include alimony, spousal sup settlement, and property sett	port, eme	ou, a non-filing spouse, or a dependent child support, maintenance, divorce nt.	8c.		0.00		\$_		0.00	_
	8d. 8e.	Unemployment compensat Social Security	ion		8d. 8e.		0.00		\$_ \$		0.00	_
	8f.	Other government assistar Include cash assistance and	the v d sta	alue (if known) of any non-cash assistance mps (benefits under the Supplemental		\$	0.00	_	Ψ- \$_		0.00	-
	8g.	Pension or retirement inco	me		8g.	\$	0.00		\$_		0.00	_
	8h.	Other monthly income. Spe	cify:	BONUSES INCLUDING CHRISTMAS BONUS PRORRATEI	D_8h.	+ \$	106.67	_ +	- \$_		0.00	_
9.	۷ طط ۶	all other income. Add lines 8	0+8k	3.19.0.19.d.19.0.19.f.19.d.19.h	9.	•	106.67	1	\$		0.0	
J.	Auu	an other income. Add lines o	aioi	roctoutoetorogton.	J. —	Ψ-	100.07		Ψ-			<u> </u>
10.		ulate monthly income. Add I he entries in line 10 for Debto		+ line 9. d Debtor 2 or non-filing spouse.	10. \$	<u> </u>	2,956.49 +	§_		0.00	= \$ _	2,956.49
11.	Includ other	de contributions from an unma friends or relatives. ot include any amounts alread	rried	the expenses that you list in Schedule partner, members of your household, your uded in lines 2-10 or amounts that are not	depei		. •		,			0.00
12.		that amount on the Summary		line 10 to the amount in line 11. The reschedules and Statistical Summary of Certa							\$	2,956.49
13.	Do yo	ou expect an increase or de	creas	se within the year after you file this form	1?							y income
	\boxtimes	No		<u>. </u>								
		Yes. Explain:										

Fill	in this informa	ation to identify yo	our case:						
Deb	otor 1	NOEL ANTO	NIO SAN	TIAGO FELICIANO		Ch		f this is:	
	otor 2 ouse, if filing)	IOVASKA CL	AUDIO V	ARGAS			As		ving postpetition chapter 13 following date:
Unit	ed States Bank	kruptcy Court for the	: DISTRI	CT OF PUERTO RICO, S	AN JUAN		M	M / DD / YYYY	
	e number nown)								
O	fficial Fo	orm 106J							
S	chedule	J: Your	Expen	ses					12/15
Be info	as complete ormation. If m	and accurate as	possible.	If two married people ar					or supplying correct ur name and case number
Par		ribe Your House	hold						
1.	Is this a joi								
	☐ No. Go t	es Debtor 2 live	in a separa	ate household?					
	_ ⊠ N								
	□ Y	Yes. Debtor 2 mus	st file Offici	al Form 106J-2, <i>Expenses</i>	s for Separate House	ehold of De	ebtor	2.	
2.	Do you hav	ve dependents?	☐ No						
	Do not list D Debtor 2.	Debtor 1 and	⊠ Yes.	Fill out this information for each dependent	Dependent's relati Debtor 1 or Debtor			Dependent's age	Does dependent live with you?
	Do not state dependents				Daughter		_	16	□ No ⊠ Yes
					Grandson			1	□ No ⊠ Yes
					0				□ No
					Grandson		_	1	⊠ Yes □ No
							_		Yes
3.	expenses of	penses include of people other t nd your depende	han 🗌	No Yes					
Par	t 2: Estim	nate Your Ongoi	na Monthi	v Evnences					
Est	imate your e	expenses as of year a date after the	our bankrı	uptcy filing date unless y y is filed. If this is a supp					
Inc	lude expense	es paid for with r	non-cash o	government assistance i	f vou know the				
val	ue of such as ficial Form 1	ssistance and ha	ave includ	ed it on Schedule I: You	rIncome		_	Your exp	enses
4.		or home owners and any rent for th		ses for your residence. I r lot.	nclude first mortgage		\$_		0.00
	If not inclu	ded in line 4:							
	4a. Real	estate taxes				12	¢		0.00
		erty, homeowner's	s, or renter	's insurance		4a. 4b.			
		e maintenance, re				4c.			
	4d. Home	eowner's associat	tion or cond	dominium dues		4d.	\$_		0.00
5.	Additional	mortgage payme	ents for yo	our residence, such as ho	me equity loans	5.	\$ _		0.00
6.	Utilities:								
٥.		ricity, heat, natura	al gas			6a.	\$		200.00
		r, sewer, garbage				6b.	\$ _		100.00
	6c. Telep	phone, cell phone	, Internet, s	atellite, and cable service	s	6c.	\$		350.00

ebtor 1	NOEL ANTONIO SANTIAGO FELICIANO			
ebtor 2	IOVASKA CLAUDIO VARGAS	Case num	ber (if known)	
6d.	Other. Specify:	6d.	\$	0.00
	d and housekeeping supplies	— 7.		1,000.00
	dcare and children's education costs	8.	· 	100.00
	hing, laundry, and dry cleaning	9.	· —	100.00
	sonal care products and services	10.		95.00
	ical and dental expenses	11.	· 	76.49
	nsportation. Include gas, maintenance, bus or train fare.		Ť	
Do r	not include car payments.	12.	\$	325.00
3. Ente	ertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	60.00
I. Cha	ritable contributions and religious donations	14.	\$	0.00
5. Ins u				
	not include insurance deducted from your pay or included in lines 4 or 20.			0.00
	Life insurance	15a.		0.00
	Health insurance	15b.	· 	0.00
	Vehicle insurance	15c.		25.00
	Other insurance. Specify:	15d.	\$	0.00
	es. Do not include taxes deducted from your pay or included in lines 4 or 20.	4.0	•	0.00
Spe	·	16.	\$	0.00
	allment or lease payments: Car payments for Vehicle 1	170	¢	0.00
	Car payments for Vehicle 2	17a.		
	• •	17b.	· —	0.00
	Other. Specify: Other. Specify:	17c.		0.00
	r payments of alimony, maintenance, and support that you did not report as	17d.	Ф	0.00
	ucted from your pay on line 5, S <i>chedule I, Your Income</i> (Official Form 106I).		\$	0.00
	er payments you make to support others who do not live with you.	10.	\$	0.00
Spe		19.	<u> </u>	0.00
	er real property expenses not included in lines 4 or 5 of this form or on Sch	edule I: Yo	our Income.	
20a.	Mortgages on other property	20a.	\$	0.00
20b.	Real estate taxes	20b.	\$	0.00
20c.	Property, homeowner's, or renter's insurance	20c.	\$	0.00
20d.	Maintenance, repair, and upkeep expenses	20d.	\$	0.00
	Homeowner's association or condominium dues	20e.	\$	0.00
1. Oth e	er: Specify:	21.	+\$	0.00
2 Calc	culate your monthly expenses			
	Add lines 4 through 21.		\$	2,506.49
	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	2,000.40
			φ	0.500.40
22C.	Add line 22a and 22b. The result is your monthly expenses.) ³ ———	2,506.49
3. Calc	culate your monthly net income.			
23a.	Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	2,956.49
23b.	Copy your monthly expenses from line 22c above.	23b.		2,506.49
23c.	Subtract your monthly expenses from your monthly income.			
	The result is your <i>monthly net income</i> .	23c.	\$	450.00
24. Do y For e modi ⊠ N	The result is your <i>monthly net income</i> . You expect an increase or decrease in your expenses within the year after y example, do you expect to finish paying for your car loan within the year or do you expect you fication to the terms of your mortgage? Jo.		s form?	450.00 ease or decrease because of
ПΥ	es. Explain here:			

Fill in this inform	nation to identify your case	9:		
Debtor 1	NOEL ANTONIO SAN			
Debtor 1	First Name	Middle Name	Last Name	
Debtor 2	IOVASKA CLAUDIO V	'ARGAS		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	nkruptcy Court for the: DI	STRICT OF PUERTO	O RICO, SAN JUAN DIVISION	
Case number				
(if known)				☐ Check if this is an
				amended filing
Declarat	ion About an	Individual	Debtor's Schedules	12/1
If two married no	onle are filing together, he			
·			ensible for supplying correct information.	
You must file thi obtaining money years, or both. 1	s form whenever you file ba	ankruptcy schedule	onsible for supplying correct information. s or amended schedules. Making a false stat kruptcy case can result in fines up to \$250,0	
You must file thi obtaining money years, or both. 1	s form whenever you file bay or property by fraud in col 8 U.S.C. §§ 152, 1341, 1519,	ankruptcy schedule nnection with a ban , and 3571.	s or amended schedules. Making a false stat	
You must file thi obtaining money years, or both. 1	s form whenever you file bay or property by fraud in col 8 U.S.C. §§ 152, 1341, 1519,	ankruptcy schedule nnection with a ban , and 3571.	s or amended schedules. Making a false stat kruptcy case can result in fines up to \$250,0	
You must file thi obtaining money years, or both. 1	s form whenever you file bay or property by fraud in col 8 U.S.C. §§ 152, 1341, 1519,	ankruptcy schedule nnection with a ban , and 3571.	s or amended schedules. Making a false statkruptcy case can result in fines up to \$250,0 rney to help you fill out bankruptcy forms? Attach Ban	
You must file this obtaining money years, or both. 1: Sign Did you pay No Yes. Under pena	s form whenever you file bay or property by fraud in coil 8 U.S.C. §§ 152, 1341, 1519, in Below y or agree to pay someone Name of person	ankruptcy schedule nnection with a ban and 3571.	s or amended schedules. Making a false statkruptcy case can result in fines up to \$250,0 rney to help you fill out bankruptcy forms? Attach Ban	No, or imprisonment for up to 20 kruptcy Petition Preparer's Notice, and Signature (Official Form 119)
You must file this obtaining money years, or both. 1: Sign Did you pay No Yes. Under pena that they are	s form whenever you file bay or property by fraud in coil 8 U.S.C. §§ 152, 1341, 1519, in Below y or agree to pay someone Name of person Ity of perjury, I declare that	ankruptcy scheduler nnection with a band and 3571. who is NOT an attor	s or amended schedules. Making a false statkruptcy case can result in fines up to \$250,0 rney to help you fill out bankruptcy forms? Attach Ban Declaration	kruptcy Petition Preparer's Notice, and Signature (Official Form 119)
You must file this obtaining money years, or both. 1: Sign Did you pay No Yes. Under penal that they are X /s/ NOE	s form whenever you file bay or property by fraud in coil 8 U.S.C. §§ 152, 1341, 1519, in Below y or agree to pay someone Name of person Ity of perjury, I declare that it is true and correct.	ankruptcy scheduler nnection with a band and 3571. who is NOT an attor	s or amended schedules. Making a false statkruptcy case can result in fines up to \$250,0 rney to help you fill out bankruptcy forms? Attach Ban Declaration	kruptcy Petition Preparer's Notice, and Signature (Official Form 119)
You must file this obtaining money years, or both. 1: Sign Did you pay No Yes. Under penal that they are X /s/ NOE NOEL /	s form whenever you file bay or property by fraud in coil 8 U.S.C. §§ 152, 1341, 1519, in Below y or agree to pay someone Name of person Ity of perjury, I declare that is true and correct.	ankruptcy scheduler nnection with a band and 3571. who is NOT an attor	s or amended schedules. Making a false statkruptcy case can result in fines up to \$250,0 rney to help you fill out bankruptcy forms? Attach Ban Declaration mary and schedules filed with this declarati	kruptcy Petition Preparer's Notice, and Signature (Official Form 119)
You must file this obtaining money years, or both. 1: Sign Did you pay No Yes. Under penal that they are X /s/ NOE NOEL /	s form whenever you file bay or property by fraud in coil 8 U.S.C. §§ 152, 1341, 1519, in Below y or agree to pay someone Name of person Ity of perjury, I declare that is true and correct. EL ANTONIO SANTIAGO ANTONIO SANTIAGO FE	ankruptcy scheduler nnection with a band and 3571. who is NOT an attor	s or amended schedules. Making a false statkruptcy case can result in fines up to \$250,0 rney to help you fill out bankruptcy forms? Attach Ban Declaration mary and schedules filed with this declaration X /s/ IOVASKA CLAUDIO VARGAS	kruptcy Petition Preparer's Notice, and Signature (Official Form 119)

Fil	ll in this inforr	nation to identify you	r case:						
De	ebtor 1	NOEL ANTONIO	SANTIAGO FELICIANO						
_		First Name	Middle Name	Last Name					
	ebtor 2 oouse if, filing)	IOVASKA CLAUI First Name	Middle Name	Last Name					
Ur	nited States Ba	nkruptcy Court for the:	DISTRICT OF PUERTO I	RICO, SAN JUAN DIVISION					
Ca	ase number								
	known)					Check if this is an amended filing			
	<u>fficial Fo</u>								
St	tatement	of Financial	Affairs for Individ	duals Filing for B	ankruptcy	04/22			
info	ormation. If i	more space is needed n). Answer every ques	l, attach a separate sheet to	o this form. On the top of a	equally responsible for sup ny additional pages, write yo				
1.		r current marital statu		LIVER BEIOTE					
	✓ Married✓ Not mar								
2.	During the last 3 years, have you lived anywhere other than where you live now?								
	⊠ No								
	Yes. List all of the places you lived in the last 3 years. Do not include where you live now.								
	Debtor 1:		Dates Debtor 1 lived there	Debtor 2 Prior Ac	ldress:	Dates Debtor 2 lived there			
3. sta					nity property state or territor ico, Texas, Washington and V				
	⊠ No □ Yes. Ma	ake sure you fill out <i>Scl</i>	nedule H: Your Codebtors (O	fficial Form 106H).					
Pa	ert 2 Explai	in the Sources of You	r Income						
4.	Fill in the tota	al amount of income yo	nployment or from operatir u received from all jobs and a have income that you receiv	all businesses, including part		ndar years?			
	☐ No ☑ Yes. Fil	I in the details.							
			Debtor 1		Debtor 2				
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)			
From January 1 of current year until the date you filed for bankruptcy:				\$24,976.88	☐ Wages, commissions, bonuses, tips	\$0.00			
			☐ Operating a business		☐ Operating a business				
	or last calenda anuary 1 to De	r year: ecember 31, 2023)		\$40,721.00		\$4,800.00			
	-		☐ Operating a business		☐ Operating a business				

	ebtor 1 No ebtor 2 IC	VASKA CI	_AUDIO VA	RGAS	Cas	e number (if known)		
				Debtor 1		Debtor 2		
				Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of inc Check all that a		Gross income (before deductions and exclusions)
		dar year be December			\$50,859.00	⊠ Wages, com bonuses, tips	missions,	\$14,368.00
				☐ Operating a business		☐ Operating a	business	
	and other winnings. List each	public bene If you are fil	fit payments; ling a joint ca the gross inc	her that income is taxable. Ex pensions; rental income; inte se and you have income that ome from each source separa	rest; dividends; money collect you received together, list it o	ted from lawsuits; only once under De	royalties; and ebtor 1.	
				Debtor 1 Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Debtor 2 Sources of inc Describe below		Gross income (before deductions and exclusions)
Pa	rt 3: Lis	t Certain Pa	ayments You	ı Made Before You Filed for	Bankruptcy			
6.	Are eithe ☐ No.	Neither D	ebtor 1 nor l	P's debts primarily consume Debtor 2 has primarily consuments a personal, family, or househo	umer debts. Consumer debt	s are defined in 11	U.S.C. § 10	1(8) as "incurred by ar
		During the No.	Go to line List below paid that c	ore you filed for bankruptcy, d 7. each creditor to whom you pa reditor. Do not include paymen payments to an attorney for t	id a total of \$7,575* or more nts for domestic support oblic	n one or more pay	ments and t	
		* Subject	to adjustmer	nt on 4/01/25 and every 3 year	rs after that for cases filed on	or after the date o	f adjustment	
	⊠ Yes.			or both have primarily consure you filed for bankruptcy, d		I of \$600 or more?	,	
		⊠ _{No.}	Go to line	7.				
		□ _{Yes}	include pa	each creditor to whom you pa /ments for domestic support c r this bankruptcy case.				
	Creditor	's Name an	d Address	Dates of payme	ent Total amount paid	Amount you still owe	Was this p	eayment for
7.	Insiders in corporation including	nclude your ons of which	relatives; any you are an o	r bankruptcy, did you make general partners; relatives of fficer, director, person in conti perate as a sole proprietor. 11	any general partners; partnerol, or owner of 20% or more	rships of which yo of their voting sec	u are a gene urities; and a	ral partner; ny managing agent,

Total amount

paid

Dates of payment

Amount you still owe

NoYes. List all payments to an insider.

Insider's Name and Address

Reason for this payment

	otor 1 NOEL ANTONIO SANTIAGO FEL otor 2 IOVASKA CLAUDIO VARGAS	ICIANO	Cas	e number (if known)					
8.	Within 1 year before you filed for bankruptoinsider? Include payments on debts guaranteed or cos		ments or transfer a	any property on a	ccount of a c	lebt that benefited an			
	☑ No☑ Yes. List all payments to an insiderInsider's Name and Address	Dates of payment	Total amount	Amount you	Reason for	this payment			
			paid	still owe	Include cred				
Par	, , , , , , , , , , , , , , , , , , ,	,							
9.	Within 1 year before you filed for bankrupte List all such matters, including personal injury modifications, and contract disputes.								
	☒ No☐ Yes. Fill in the details.								
	Case title Case number	Nature of the case	Court or agency		Status of th	ne case			
10.	Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below.								
	No. Go to line 11.Yes. Fill in the information below.								
	Creditor Name and Address	Describe the Property Explain what happened	ı	Date		Value of the property			
11.	Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? ☑ No ☐ Yes. Fill in the details.								
	Creditor Name and Address	Describe the action the creditor took			Date action was Amou taken				
12.	Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?								
	No Yes ✓ Yes No No No No No No No No No No								
Par	t 5: List Certain Gifts and Contributions								
13.	Within 2 years before you filed for bankrup No Yes. Fill in the details for each gift.	tcy, did you give any gift	s with a total value	of more than \$60	0 per person	?			
	Gifts with a total value of more than \$600 per person	Describe the gifts		Dates the gi	you gave fts	Value			
	Person to Whom You Gave the Gift and Address:								
14.	Within 2 years before you filed for bankrup ☑ No ☐ Yes. Fill in the details for each gift or con		s or contributions	with a total value	of more than	\$600 to any charity?			
	Gifts or contributions to charities that to more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)		contributed	Dates contri	you buted	Value			

	otor 1 NOEL ANTONIO SANTIAGO FELIC otor 2 IOVASKA CLAUDIO VARGAS		Case number (if known)						
Par	t 6: List Certain Losses								
	Within 1 year before you filed for bankruptcy disaster, or gambling?	or since you filed for bankruptcy, did	you lose anything because of th	eft, fire, other					
	☑ No☑ Yes. Fill in the details.								
	how the loss occurred Inc.	scribe any insurance coverage for the loude the amount that insurance has paid. Loude the amount that insurance claims on line 33 of Schedule A/B:	_ist pending	Value of property lost					
Par	t 7: List Certain Payments or Transfers								
16.	Within 1 year before you filed for bankruptcy consulted about seeking bankruptcy or prepinclude any attorneys, bankruptcy petition prepared in the seeking bankruptcy petition between the	paring a bankruptcy petition?							
	Yes. Fill in the details. Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and value of any prop transferred	Date payment or transfer was made	Amount of payment					
	MORENO LAW OFFICE LLC PO Box 679 Trujillo Alto, PR 00977 rmoreno@morenolawpr.com	FILING FEES \$313.00ADVANC FEES \$1,687.00	E ON AUGUST 2024	\$1,687.00					
17.	Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16.								
	NoYes. Fill in the details.								
	Person Who Was Paid Address	Description and value of any prop transferred	Date payment or transfer was made	Amount of payment					
18.	Within 2 years before you filed for bankruptor transferred in the ordinary course of your but located both outright transfers and transfers mainclude gifts and transfers that you have already No	usiness or financial affairs? de as security (such as the granting of a s	, , , , , ,						
	Person Who Received Transfer Address	Description and value of property transferred	Describe any property or payments received or debts paid in exchange	Date transfer was made					
19.	Person's relationship to you Within 10 years before you filed for bankrup beneficiary? (These are often called asset-pro No Yes. Fill in the details.		self-settled trust or similar device	e of which you are a					
	Name of trust	Description and value of the prope	erty transferred	Date Transfer was made					

	btor 1 btor 2	NOEL ANTONIO SANTIAGO FEL IOVASKA CLAUDIO VARGAS	ICIANO		Case nun	nber (if known)				
Pa	rt 8:	List of Certain Financial Accounts, In	struments, Safe Deposi	t Boxes, and S	Storage Uni	ts				
	Within sold, Included house	n 1 year before you filed for bankrupto moved, or transferred? de checking, savings, money market, es, pension funds, cooperatives, asso No Yes, Fill in the details.	cy, were any financial accou	ccounts or instants; certificate	truments he	eld in your name, or for	•			
	Name of Financial Institution and		Last 4 digits of account number	Type of account or instrument		Date account was closed, sold, moved, or transferred	Last balance before closing or transfer			
	RIC(BAN	ICO POPULAR DE PUERTO O IKRUPTCY DEPARTMENT BOX 366818	XXXX -3294	☐ Checking ☑ Savings ☐ Money Ma ☐ Brokerage ☐ Other		SEPTEMBER 2024	\$0.00			
	San	Juan, PR 00936-6818								
21.	cash,	ou now have, or did you have within 1 or other valuables? No Yes. Fill in the details.	year before you filed fo	r bankruptcy, a	any safe de	posit box or other depo	sitory for securities,			
	Nam	e of Financial Institution 'ess (Number, Street, City, State and ZIP Code)		Who else had access to it? Address (Number, Street, City, State and ZIP Code)		the contents	Do you still have it?			
22.	Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?									
	=	No Yes. Fill in the details.								
		e of Storage Facility 'ess (Number, Street, City, State and ZIP Code)	Who else has or to it? Address (Number, S State and ZIP Code)		Describe	Do you still have it?				
Pa	rt 9:	Identify Property You Hold or Contro	I for Someone Else							
23.		ou hold or control any property that so omeone.	omeone else owns? Incl	ude any prope	erty you bor	rowed from, are storing	for, or hold in trust			
	=	No Yes. Fill in the details.								
		er's Name 'ess (Number, Street, City, State and ZIP Code)	Where is the property (Number, Street, City, Scode)		Describe	the property	Value			
Pa	rt 10:	Give Details About Environmental Inf	ormation							
For	the pu	rpose of Part 10, the following definit	ions apply:							
	toxic regula Site n to ow Hazar	onmental law means any federal, state substances, wastes, or material into the ations controlling the cleanup of these neans any location, facility, or propertion, operate, or utilize it, including disperdous material means anything an envidous material, pollutant, contaminant	the air, land, soil, surface e substances, wastes, of ty as defined under any osal sites. vironmental law defines	e water, groun or material. environmenta	idwater, or I law, wheth	other medium, including	g statutes or te, or utilize it or used			

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

Deb	otor 2 IOVASKA CLAUDIO VARGAS		Case number (if known)						
			· · · · ·						
24.	Has any governmental unit notified you that	t you may be liable or potentially liable	under or in violation of an environm	nental law?					
	NoYes. Fill in the details.								
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice					
25.	Have you notified any governmental unit of	any release of hazardous material?							
	☑ No☐ Yes. Fill in the details.								
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice					
26.	Have you been a party in any judicial or adı	ministrative proceeding under any envi	ronmental law? Include settlements	and orders.					
	⊠ No								
	Yes. Fill in the details.								
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case					
Par	t 11: Give Details About Your Business or	Connections to Any Business							
		-	y of the following connections to an	v husings?					
21.	Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?								
		pany (LLC) or limited liability partnershi							
	☐ A partner in a partnership								
	☐ An officer, director, or managing executive of a corporation								
	☐ An owner of at least 5% of the voting or equity securities of a corporation								
	□ No. None of the above applies. Go to Part 12.								
	☑ Yes. Check all that apply above and fill in the details below for each business.								
	Business Name Address	Describe the nature of the business	Employer Identification numbe Do not include Social Security						
	(Number, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Dates business existed						
	CHISPI BURGERS		EIN:						
			From-To SEPTEMBER 2023 FEBRUARY 2024	3 UNTIL					
28.	Within 2 years before you filed for bankrup institutions, creditors, or other parties.	tcy, did you give a financial statement t	o anyone about your business? Incl	ude all financial					
	Yes. Fill in the details below.								
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued							

Debtor 1 NOEL ANTONIO SANTIAGO FELICIANO

Debtor 1 NOEL ANTONIO SANTIAGO FELICIAL Debtor 2 IOVASKA CLAUDIO VARGAS	NO	Coco number (# Immun)
Debiol 2 TO VACINA CLAUDIO VAINGAG		Case number (if known)
Part 12: Sign Below		
	e statement, concealing prope	is, and I declare under penalty of perjury that the answers erty, or obtaining money or property by fraud in connection to 20 years, or both.
/s/ NOEL ANTONIO SANTIAGO FELICIANO	/s/ IOVASKA CLAUDIC) VARGAS
NOEL ANTONIO SANTIAGO FELICIANO Signature of Debtor 1	IOVASKA CLAUDIO V. Signature of Debtor 2	ARGAS
Date October 3, 2024	Date October 3, 20	24
Did you attach additional pages to Your Statement o ⊠ No □ Yes	f Financial Affairs for Individu	als Filing for Bankruptcy (Official Form 107)?
Did you pay or agree to pay someone who is not an ⊠ No □ Yes. Name of Person . Attach the <i>Bankruptcy</i>		. ,

Fill in this information to identify your case:						
Debtor 1 NOEL ANTONIO SANTIAGO FELICIANO						
Debtor 2 (Spouse, if filing)		VARGAS				
United States B	ankruptcy Court for the:	District of Puerto Rico, San Juan Division				
Case number(if known)						

Check as directed in lines 17 and 21:						
According to the calculations required by this Statement:						
1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).						
2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).						
3. The commitment period is 3 years.						
4. The commitment period is 5 years.						
☐ Check if this is an amended filing						

Official Form 122C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

10/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Part 1: **Calculate Your Average Monthly Income**

1. What is your marital and filing status? Check one only. ☐ Not married. Fill out Column A, lines 2-11.

Married. Fill out both Columns A and B, lines 2-11.

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A)

а	or example, it you are filing on September 15, the 6-month period dd the income for all 6 months and divide the total by 6. Fill in the ental property, put the income from that property in one column	ne result.	Do not inc	lude any income	amoun	t more than once.	For exam	
					Colui Debt		Colum. Debto	
2.	Your gross wages, salary, tips, bonuses, overtime payroll deductions).	, and co	ommissi	ons (before all	\$	3,035.47	\$	0.00
3.	Alimony and maintenance payments. Do not includ Column B is filled in.	e payme	ents from	a spouse if	\$	0.00	\$	0.00
4.	All amounts from any source which are regularly portion or your dependents, including child support from an unmarried partner, members of your househo and roommates. Do not include payments from a spouyou listed on line 3.	rt. Includ ld, your	de regula depende	r contributions nts, parents,	\$	0.00	\$	0.00
5.	Net income from operating a business, profession, or farm	Debtor	r 1					
	Gross receipts (before all deductions)	\$_	0.00					
	Ordinary and necessary operating expenses	-\$ _	0.00					
	Net monthly income from a business, profession, or fa	ırm \$ _	0.00	Copy here ->	\$	0.00	\$	0.00
6.	Net income from rental and other real property	Debtor	r 1					
	Gross receipts (before all deductions)	\$_	0.00					
	Ordinary and necessary operating expenses	-\$ _	0.00					
	Net monthly income from rental or other real property	\$_	0.00	Copy here ->	\$	0.00	\$	0.00

Case number (if known)

		Column A Debtor 1	Column B Debtor 2 onon-filing	or
7.	Interest, dividends, and royalties	\$0.	00 \$	0.00
8.	Unemployment compensation	\$0.	00 \$	0.00
	Do not enter the amount if you contend that the amount received was a benefit und the Social Security Act. Instead, list it here:	ler		
	For you\$ 0.00			
	For your spouse\$ 0.00			
	Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act. Also, except as stated in the next sentence, on the include any compensation, pension, pay, annuity, or allowance paid by the Unite States Government in connection with a disability, combat-related injury or disability or death of a member of the uniformed services. If you received any retired pay pai under chapter 61 of title 10, then include that pay only to the extent that it does not exceed the amount of retired pay to which you would otherwise be entitled if retired under any provision of title 10 other than chapter 61 of that title.	ed y, id i \$0.	<u>00</u> \$	0.00
10	Income from all other sources not listed above. Specify the source and amount Do not include any benefits received under the Social Security Act; payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism; or compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability or death of a member of the uniformed services. If necessary, list other sources on separate page and put the total below.	ed y,		
	UBER	\$1,325.	<u>75</u> \$	0.00
	BONUSES INCLUDING CHRISTMAS BONUS	\$106.	<u>67</u> \$	0.00
	Total amounts from separate pages, if any.	+ \$0.	00\$	0.00
11.	Calculate your total average monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B.	4,467.89	\$0.00	\$ 4,467.89 Total average monthly income
Part	Determine How to Measure Your Deductions from Income			
	Copy your total average monthly income from line 11. Calculate the marital adjustment. Check one: You are not married. Fill in 0 below. You are married and your spouse is filing with you. Fill in 0 below. You are married and your spouse is not filing with you. Fill in the amount of the income listed in line 11, Column B, that was NOT regula such as payment of the spouse's tax liability or the spouse's support of someon Below, specify the basis for excluding this income and the amount of income determined.	arly paid for the hous	sehold expenses r your dependent	s.
	on a separate page.	evoted to each purp	ose. ii necessary,	iist additional adjustments
	If this adjustment does not apply, enter 0 below.			
	<u>+\$ _</u>		_	
	Total\$_	0.00	Copy here=>	- 0.00
14.	Your current monthly income. Subtract line 13 from line 12.			\$4,467.89_
15.	Calculate your current monthly income for the year. Follow these steps:			
	15a. Copy line 14 here=>			\$4,467.89_

Debt Debt		_	EL ANTONIO SANTIAGO FELICIANO ASKA CLAUDIO VARGAS		Case number (<i>if known</i>)		
		N	ultiply line 15a by 12 (the number of months in	a year).			c 12
	15	b. T	ne result is your current monthly income for the	year for this pa	art of the form.	\$_	53,614.62
16	. Cal	culat	e the median family income that applies to y	ou. Follow thes	e steps:		
	16a	. Fill i	n the state in which you live.	PR			
	16b	. Fill i	n the number of people in your household.	5	<u> </u>		
47		To f	n the median family income for your state and s nd a list of applicable median income amounts uctions for this form. This list may also be avai	, go online usino	g the link specified in the separate	\$_	53,438.00
17			the lines compare?	. 41 4	A of this forms of solid and Diagraphic income		
	17a	. ∟	Line 15b is less than or equal to line 16c. Or <i>U.S.C.</i> § <i>1325(b)(3)</i> . Go to Part 3. Do NOT		e 1 of this form, check box 1, <i>Disposable inco</i> iion of Your Disposable Income (Official Forn		eterminea under 11
	17b	. 🛭		lation of Your	form, check box 2, Disposable income is de Disposable Income (Official Form 122C-2		
Par	t 3:	Ca	alculate Your Commitment Period Under 11	U.S.C. § 1325(b	o)(4)		
18.	Cop	у уо	ur total average monthly income from line 1	1		\$	4,467.89
19.	that	calcu	the marital adjustment if it applies. If you are allating the commitment period under 11 U.S.C. copy the amount from line 13.	married, your sp § 1325(b)(4) all	oouse is not filing with you, and you contend ows you to deduct part of your spouse's		
			e marital adjustment does not apply, fill in 0 on	line 19a.		-\$	0.00
	19b	. Sub	tract line 19a from line 18.			\$	4,467.89
20.	Cal	culat	your current monthly income for the year.	Follow these st	teps:		
	20a	. Сор	y line 19b			\$_	4,467.89
		Mult	iply by 12 (the number of months in a year).				c 12
	20b	. The	result is your current monthly income for the ye	ear for this part o	of the form	\$_	53,614.62
	20c	. Сор	y the median family income for your state and	size of househo	ld from line 16c	\$_	53,438.00
	21.	Hov	do the lines compare?				
			Line 20b is less than line 20c. Unless otherwis period is 3 years. Go to Part 4.	se ordered by th	e court, on the top of page 1 of this form, ch	eck box 3,	The commitment
		\boxtimes	Line 20b is more than or equal to line 20c. Un commitment period is 5 years. Go to Part 4.	less otherwise o	ordered by the court, on the top of page 1 of	this form, c	heck box 4, <i>The</i>

Part 4: Sign Below

By signing here, under penalty of perjury I declare that the information on this statement and in any attachments is true and correct.

X /s/ NOEL ANTONIO SANTIAGO FELICIANO

NOEL ANTONIO SANTIAGO FELICIANO Signature of Debtor 1

Date October 3, 2024

MM / DD / YYYY

X /s/ IOVASKA CLAUDIO VARGAS

IOVASKA CLAUDIO VARGAS Signature of Debtor 2

Date October 3, 2024 MM / DD / YYYY

If you checked 17a, do NOT fill out or file Form 122C-2.

If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.

NOEL ANTONIO SANTIAGO FELICIANO IOVASKA CLAUDIO VARGAS

Debtor 1 Debtor 2

JDIO VARGAS Case number (if known)

Fill in	this information to identify your case:				
Debtor	r 1 NOEL ANTONIO SANTIAGO FELICIA	NO			
Debtor	r 2 IOVASKA CLAUDIO VARGAS				
(Spous	se, if filing)				
United	District of Puerto F States Bankruptcy Court for the: Division	≀ico, San Juan			
Case r	number		□ Che	ck if this is an amended filing	
(II KIIO	wii)			ok ii tilis is all amended illing	
	Form 122C-2	Niamaaabla lu			
	pter 13 Calculation of Your D	<u> </u>		04/2	22
	out this form, you will need your completed copy o itment Period (Official Form 122C-1).	f Chapter 13 Stateme	nt of Your Current Monthl	y Income and Calculation of	
	·				
space i	complete and accurate as possible. If two married is needed, attach a separate sheet to this form, Incl. write your name and case number (if known).				a
Part 1		;			
	e Internal Revenue Service (IRS) issues National and estions in lines 6-15. To find the IRS standards, go				е
	ormation may also be available at the bankruptcy c				
exp	duct the expense amounts set out in lines 6-15 regardle enses if they are higher than the standards. Do not inc C–1, and do not deduct any amounts that you subtrac	clude any operating exp	enses that you subtracted f	rom income in lines 5 and 6 of Form	
If yo	our expenses differ from month to month, enter the ave	erage expense.			
Note	e: Line numbers 1-4 are not used in this form. These n	numbers apply to inform	ation required by a similar f	orm used in chapter 7 cases.	
5.	The number of people used in determining your o	,	, ,	· ·	
0.	The number of people used in determining your c	reductions from fricor			
	Fill in the number of people who could be claimed as the number of any additional dependents whom you number of people in your household.			5 Living Housing	
Nati	ional Standards You must use the IRS Natio	onal Standards to answ	er the questions in lines 6-7	7.	
6.	Food, clothing, and other items: Using the number fill in the dollar amount for food, clothing, and other it		n line 5 and the IRS Nationa	al Standards, \$2,413.00	
7.	Out-of-pocket health care allowance: Using the nutrithe dollar amount for out-of-pocket health care. The repeople who are 65 or olderbecause older people has higher than this IRS amount, you may deduct the additional supplies that the supplies	number of people is spl ave a higher IRS allowa	it into two categoriespeop nce for health car costs. If y	le who are under 65 and	
Peo	ople who are under 65 years of age				_
	7a. Out-of-pocket health care allowance per person	\$ 83.00			
	7b. Number of people who are under 65	X5			
	7c. Subtotal. Multiply line 7a by line 7b.	\$ 415.00	Copy here=> \$	415.00	

Official Form 122C-2

People who are 65 years of age or older

ebtor 1 ebtor 2		IOEL ANTONIO SANTIAGO FELICIANO DVASKA CLAUDIO VARGAS				Case number (if	known) _		
	7d.	Out-of-pocket health care allowance per person	\$	158.00					
	7e.	Number of people who are 65 or older	x	0					
	7f.	Subtotal. Multiply line 7d by line 7e.	\$	0.00		Copy here=	> \$	0.00	
	7g.	Total. Add line 7c and line 7f			\$	415.00	Сор	oy total here=>	\$415.00
Loc	al Sta	andards You must use the IRS Local Standards to	o answe	er the questi	ons in line	es 8-15.			
Based on information from the IRS, the U.S. Trustee Program has divided the IRS Local Standard for housing for bankruptcy purposes into two parts: Housing and utilities - Insurance and operating expenses Housing and utilities - Mortgage or rent expenses To answer the questions in lines 8-9, use the U.S. Trustee Program chart. To find the chart, go online using the link specified in the sep instructions for this form. This chart may also be available at the bankruptcy clerk's office. Housing and utilities - Insurance and operating expenses: Using the number of people you entered in line 5, fill in the dollar amount listed for your county for insurance and operating expenses. 807. Housing and utilities - Mortgage or rent expenses: 9a. Using the number of people you entered in line 5, fill in the dollar amount listed for your county for mortgage or rent expenses. 934.00									
9b. Total average monthly payment for all mortgages and other debts secured by your To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Next divide by 60.						our home.			
		Name of the creditor		Average mo payment	nthly				
		-NONE-	\$	§					
		9b. Total average monthly paymer	nt \$	5	0.00	Copy here=>	-\$	0.00	Repeat this amount on line 33a.

9c. Net mortgage or rent expense.

Subtract line 9b (total average monthly payment) from line 9a (mortgage or rent expense). If this number is less than \$0, enter \$0.

\$_____934.00 | Copy here=> \$____934.00

10. If you claim that the U.S. Trustee Program's division of the IRS Local Standard for housing is incorrect and affects the calculation of your monthly expenses, fill in any additional amount you claim.

0.00

Explain why:

NOEL ANTONIO SANTIAGO FELICIANO

Debtor 1 Debtor 2

IOVASKA CLAUDIO VARGAS Case number (if known)

11.	Local transportation expenses: Check the number of vehi	icles for which you claim	n an ownership or operati	ng expense.	
	☑ 0. Go to line 14.				
	1. Go to line 12.				
	2 or more. Go to line 12.				
12.	Vehicle operation expense: Using the IRS Local Standard operating expenses, fill in the <i>Operating Costs</i> that apply for				0.00
13.	Vehicle ownership or lease expense: Using the IRS Local may not claim the expense if you do not make any loan or lethan two vehicles.				
Ve	hicle 1 Describe Vehicle 1:				
13a	Ownership or leasing costs using IRS Local Standard			-	
13b	Average monthly payment for all debts secured by Vehicle 1	l.			
	Do not include costs for leased vehicles.				
	To calculate the average monthly payment here and on line are contractually due to each secured creditor in the 60 mor bankruptcy. Then divide by 60.		at		
	Name of each creditor for Vehicle 1	Average monthly payment			
		\$			
	Total Average Monthly Payment	\$	Copy here => -\$	Repeat this amount on line 33b.	
13c.	Net Vehicle 1 ownership or lease expense Subtract line 13b from line 13a. if this number is less than \$6	0, enter \$0	\$0.00	Copy net Vehicle 1 expense here => \$	0.00
Ve	hicle 2 Describe Vehicle 2:			-	
13d	Ownership or leasing costs using IRS Local Standard		\$0.00	-	
13e	Average monthly payment for all debts secured by Vehicle 2 leased vehicles.	2. Do not include costs for	or		
	Name of each creditor for Vehicle 2	Average monthly payment			
		_ \$			
	Total average monthly payment	\$	Copy here => -\$ 0	Repeat this amount on line 33c.	
13f.	Net Vehicle 2 ownership or lease expense			Copy net	
	Subtract line 13e from line 13d. if this number is less than \$6	0, enter \$0	 \$	Vehicle 2 expense here => \$ _	0.00
14.	Public transportation expense: If you claimed 0 vehicles Public Transportation expense allowance regardless of			in the \$	215.00
15.	Additional public transportation expense: If you claimed also deduct a public transportation expense, you may fill in we claim more than the IRS Local Standard for <i>Public Transportation</i> .	hat you believe is the ap			0.00

Oth	er Necessary Expenses	In addition to the expense of the following IRS categories		listed above,	you are allowed your monthly expenses	for	
16.	self-employment taxes, soo your pay for these taxes. He	cial security taxes, and Medic owever, if you expect to rece he total monthly amount tha	care taxes ive a tax r	. You may inc efund, you mu	d local taxes, such as income taxes, lude the monthly amount withheld from st divide the expected refund by 12 and axes.	\$	424.70
17.	Involuntary deductions: Tunion dues, and uniform co		uctions th	at your job req	uires, such as retirement contributions,		
	Do not include amounts that	at are not required by your jo	b, such as	s voluntary 40	1(k) contributions or payroll savings.	\$	0.00
18.	together, include payments	that you make for your spour life insurance on your depe	ise's term	life insurance	nsurance. If two married people are filing . spouse's life insurance, or for any form of		0.00
19.	agency, such as spousal or	child support payments.			by the order of a court or administrative		
					ou will list these obligations in line 35.	\$	0.00
20.	as a condition for your jo				equired: ation is available for similar services.	\$	0.00
21	_ , , , ,	, , ,		•	itting, daycare, nursery, and preschool.	· <u> </u>	
		or any elementary or second	-	•		\$	0.00
22.	2. Additional health care expenses, excluding insurance costs: The monthly amount that you pay for health care that is required for the health and welfare of you or your dependents and that is not reimbursed by insurance or paid by a health savings account. Include only the amount that is more than the total entered in line 7.					•	0.00
	•	nce or health savings accou		•		\$	0.00
20.	23. Optional telephone and telephone services: The total monthly amount that you pay for telecommunication services for you and your dependents, such as pagers, call waiting, caller identification, special long distance, or business cell phone service, to the extent necessary for your health and welfare or that of your dependents or for the production of income, if it is not reimbursed by your employer. Do not include payments for basic home telephone, internet and cell phone service. Do not include self-employment expenses, such as those reported on line 5 of Official Form 122C-1, or any amount you previously deducted.						0.00
24.	Add all of the expenses a Add lines 6 through 23.	llowed under the IRS expe	nse allow	ances.		\$	5,208.70
Add	itional Expense Deduction	These are additional d Note: Do not include a					
25.					ses. The monthly expenses for health y necessary for yourself, your spouse, o	r	
	Health insurance		\$	0.00			
	Disability insurance		\$	0.00			
	Health savings account	4	\$	0.00	1		
	Total		\$	0.00	Copy total here=>	\$	0.00
	Do you actually spend this ☐ No. How much do y ☐ Yes		\$				
26.	continue to pay for the reas	sonable and necessary care	and suppo o is unab	ort of an elderl le to pay for si	e actual monthly expenses that you will y, chronically ill, or disabled member of uch expenses. These expenses may 29A(b)	\$	0.00
27.					nses that you incur to maintain the safety or other federal laws that apply.	,	
	By law, the court must keep the nature of these expenses confidential.				\$	0.00	

IOVASKA CLAUDIO VARGAS	Case number (if known)		
 Additional home energy costs. Your hor 8. 	me energy costs are included in your insurance and operating expenses on line		
If you believe that you have home energy of then fill in the excess amount of home energy	costs that are more than the home energy costs included in expenses on line 8, ergy costs		
You must give your case trustee documer claimed is reasonable and necessary.	ntation of your actual expenses, and you must show that the additional amount	\$_	0.0
	Idren who are younger than 18. The monthly expenses (not more than dependent children who are younger than 18 years old to attend a private or		
You must give your case trustee documer is reasonable and necessary and not alre-	ntation of your actual expenses, and you must explain why the amount claimed ady accounted for in lines 6-23.		
* Subject to adjustment on 4/01/25, and e	very 3 years after that for cases begun on or after the date of adjustment.	\$	0.0
	The monthly amount by which your actual food and clothing expenses are g allowances in the IRS National Standards. That amount cannot be more than the IRS National Standards.		
To find a chart showing the maximum add for this form. This chart may also be available.	itional allowance, go online using the link specified in the separate instructions able at the bankruptcy clerk's office.		
You must show that the additional amoun	t claimed is reasonable and necessary.	\$_	0.0
 Continuing charitable contributions. The instruments to a religious or charitable org 			
Do not include any amount more than 15%	% of your gross monthly income.	\$	0.0
 Add all of the additional expense deduced Add lines 25 through 31. 	ctions.	\$	0.00
eductions for Debt Payment			
 For debts that are secured by an interest and other secured debt, fill in lines 33a t 	in property that you own, including home mortgages, vehicle loans, through 33e.		
To calculate the total average monthly payl creditor in the 60 months after you file for b	ment, add all amounts that are contractually due to each secured rankruptcy. Then divide by 60.		
Mortgages on your home		Averag payme	e monthly nt
Ba. Copy line 9b here	=>	\$	0.00
Loans on your first two vehicles			
Bb. Copy line 13b here		\$	280.72
	=>	\$	0.00
Bd. List other secured debts:			
ame of each creditor for other secured debt	Identify property that secures the debt Does payment include taxes or insurance?		
	BACK TAXES OVER PROPERTY		
	LOCATED AT URB LOS ANGELES, 6 ⊠ No		
CRIM	LOCATED AT URB LOS ANGELES, 6 No	\$	121.10

Official Form 122C-2

SCOUT

33e Total average monthly payment. Add lines 33a through 33d.....

PERFORMANCE FINANCE

150.23

552.05

☐ Yes

☐ No☐ Yes

552.05

+\$

Copy total

here=>

	EL ANTONIO SANTIAGO /ASKA CLAUDIO VARGA		Cas	se number (<i>if known</i>)			
		e 33 secured by your primary residence support or the support of your depend		, or			
⊠ No.	Go to line 35. State any amount that you	must pay to a creditor, in addition to the pair ion of your property (called the <i>cure amou</i>	ayments lis	ted			
Name of th	e creditor	Identify property that secures the debt		Total cure amount		lonthly cure mount	
-NONE-			\$		÷ 60 = \$		
			Total	\$0.00	Copy total here=>	> \$	0.00
		uch as a priority tax, child support, or a f your bankruptcy case? 11 U.S.C. § 50		hat			
		ll of these priority claims. Do not include c ch as those you listed in line 19.	urrent or				
	Total amount of all past-d	ue priority claims		\$68.1	<u>5</u> ÷ 60	\$	1.14
36. Project	ed monthly Chapter 13 plan	payment		\$			
Office of the Execution To find a	of the United States Courts (for ecutive Office for United States a list of district multipliers that inclu	stated on the list issued by the Administrat r districts in Alabama and North Carolina) s Trustees (for all other districts). ides your district, go online using the link specifi t may also be available at the bankruptcy clerk's	or by	х	-		
Average	e monthly administrative expe	ense		\$	Copy tota		
37. Add a	II of the deductions for deb	t payment. Add lines 33e through 36.				\$	553.19
Total Dedu	ictions from Income						
38. Add all	of the allowed deductions.						
Copy I	line 24, <i>All of the expenses al</i>	lowed under IRS					

Copy line 24, All of the expenses allowed under IRS expense allowances	\$	5,208.70	
Copy line 32, All of the additional expense deductions	\$	0.00	
Copy line 37, All of the deductions for debt payment	+\$	553.19	
]
Total deductions	\$	5,761.88	Copy total here=>

\$ _____5,761.88

NOEL ANTONIO SANTIAGO FELICIANO IOVASKA CLAUDIO VARGAS

Debtor 1

Debtor 2

Case number (if known)

Part 2	Determine Your Disposable Income Under 11 U.S.C. § 1325(b)(2)	
39.	Copy your total current monthly income from line 14 of Form 122C-1, Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period	\$\$
	Fill in any reasonably necessary income you receive for support for dependent children. The monthly average of any child support payments, foster care payments, or disability payments for a dependent child, reported in Part I of Form 122C-1, that you received in accordance with applicable nonbankruptcy law to the extent reasonably necessary to be expended for such child.	\$0.00_
	Fill in all qualified retirement deductions. The monthly total of all amounts that your employer withheld from wages as contributions for qualified retirement plans, as specified in 11 U.S.C. § 541(b)(7) plus all required repayments of loans from retirement plans, as specified in 11 U.S.C. § 362(b)(19).	\$103.42_
42.	Total of all deductions allowed under 11 U.S.C. § 707(b)(2)(A). Copy line 38 here=>	\$5,761.88_
	Deduction for special circumstances. If special circumstances justify additional expenses and you have no reasonable alternative, describe the special circumstances and their expenses. You must give your case trustee a detailed explanation of the special circumstances and documentation for the expenses.	
Des	scribe the special circumstances Amount of expens	se
		00
	\$ 0.0	00
	\$ 0.0	00
		Copy here=> \$
44.	Total adjustments. Add lines 40 through 43	Copy here=> -\$

Part 3: Change in Income or Expenses

46. Change in income or expenses. If the income in Form 122C-1 or the expenses you reported in this form have changed or are virtually certain to change after the date you filed your bankruptcy petition and during the time your case will be open, fill in the information below. For example, if the wages reported increased after you filed your petition, check 122C-1 in the first column, enter line 2 in the second column, explain why the wages increased, fill in when the increase occurred, and fill in the amount of the increase.

45. Calculate your monthly disposable income under § 1325(b)(2). Subtract line 44 from line 39.

Form	Line	Reason for change	Date of change	Increase or decrease?	Amount of change

0.00

Sabtan 1	NOEL ANTONIO SANTIAGO FELICIANO		
Debtor 1 Debtor 2	IOVASKA CLAUDIO VARGAS	Case number (if known)	

Part 4:	Sign Below	
	By signing here, under penalty of perjury you declare that the info	ormation on this statement and in any attachments is true and correct. X /s/ IOVASKA CLAUDIO VARGAS
^	NOEL ANTONIO SANTIAGO FELICIANO NOEL ANTONIO SANTIAGO FELICIANO Signature of Debtor 1	IOVASKA CLAUDIO VARGAS Signature of Debtor 2
Date	October 3, 2024 MM / DD / YYYY	Date October 3, 2024 MM / DD / YYYY

Current Monthly Income Details for the Debtor

Debtor Income Details:

Debtor 1

Debtor 2

Income for the Period 04/01/2024 to 09/30/2024.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions Source of Income: Employer: STRATAIR PUERTO RICO

Constant income of \$3,035.47 per month.*

Line 10 - Income from all other sources

Source of Income: UBER

6 Identical Payments of \$1,325.75 Average Monthly Income: \$1,325.75

Line 10 - Income from all other sources

Source of Income: BONUSES INCLUDING CHRISTMAS BONUS

1 Identical Payments of \$640.00 Average Monthly Income: \$106.67 Debtor 1 Debtor 2

Case number (if known)

*Paycheck Details:

STRATAIR PUERTO RICO

Date	Earnings	Overtime	Taxes	Other	Net Check
3/1/2024	1,451.12	244.09	249.50	50.86	1,394.85
3/15/2024	1,403.85	473.30	298.04	56.31	1,522.80
3/29/2024	1,319.20	934.17	418.05	67.60	1,767.72
4/12/2024	1,459.20	480.72	318.07	58.20	1,563.65
4/26/2024	1,319.20	418.86	258.60	52.14	1,427.32
5/10/2024	1,277.15	98.96	181.76	41.28	1,153.07
5/24/2024	1,319.20	174.42	206.71	44.81	1,242.10
6/7/2024	1,319.21	173.18	206.45	44.77	1,241.17
6/21/2024	1,319.20	122.05	195.60	43.24	1,202.41
7/5/2024	1,319.20	0.00	169.68	39.58	1,109.94
7/19/2024	1,319.22	25.54	173.22	53.79	1,117.75
8/2/2024	1,122.97	405.26	211.92	61.13	1,255.18
8/16/2024	1,319.20	138.11	196.97	58.29	1,202.05
8/16/2024	1,319.20	138.11	196.97	58.29	1,202.05
8/30/2024	1,419.20	205.43	232.23	64.99	1,327.41
Totals:	20,006.32	4,032.20	3,513.77	795.28	19,729.47

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chap	oter 7:	Liquidation
	\$245	filing fee
	\$78	administrative fee
<u>+</u>	\$15	trustee surcharge
	\$338	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

	\$1,167	filing fee
+	\$571	administrative fee
	\$1,738	total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

+	\$200 \$78	filing fee administrative fee
	\$278	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$78	administrative fee
	\$313	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/forms/bankruptcy-forms

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://www.uscourts.gov/services-forms/bankruptcy/credit-counseling-and-debtor-education-courses.

In Alabama and North Carolina, go to: http://www.uscourts.gov/services-forms/bankruptcy/credit-counseling-and-debtor-education-courses.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

United States Bankruptcy Court District of Puerto Rico, San Juan Division

	NOEL ANTONIO SANTIAGO FELICIANO			
In re	IOVASKA CLAUDIO VARGAS		Case No.	
		Debtor(s)	Chapter	13

	DISCLOSURE OF COMPENSATION OF ATTORNE	Y FO	R DEBTOR(S)	
l.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:	r the abo	ve named debtor(s) and that compensa	
	FLAT FEE			
	For legal services, I have agreed to accept	\$		
	Prior to the filing of this statement I have received			
	Balance Due			
	□ RETAINER			
	For legal services, I have agreed to accept and received a retainer of	\$	1,687.00	
	The undersigned shall bill against the retainer at an hourly rate of	\$	250.00	
2.	The source of the compensation paid to me was:			
	□ Debtor □ Other (specify):			
3.	The source of compensation to be paid to me is:			
	Debtor Other (specify):			
1.	☐ I have not agreed to share the above-disclosed compensation with any other person unles	s they are	e members and associates of my law fi	rm.
	☐ I have agreed to share the above-disclosed compensation with a person or persons who are of the agreement, together with a list of the names of the people sharing in the compensation.			ору
5.	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the	ne bankrı	uptcy case, including:	
	 a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determin b. Preparation and filing of any petition, schedules, statement of affairs and plan which may c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any d. [Other provisions as needed] Negotiations with secured creditors to reduce to market value; exemption pla agreements and applications as needed; preparation and filing of motions put 	be require adjourn	red; ed hearings thereof; preparation and filing of reaffirmation	
ó.	liens on household goods. By agreement with the debtor(s), the above-disclosed fee does not include the following serving Representation of the debtors in any dischargeability actions, judicial lien available adversary proceeding.		s, relief from stay actions or any oth	ner

NOEL ANTONIO SANTIAGO FELICIANO	
IOVASKA CLAUDIO VARGAS	

In re

Debtor(s)

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)

(Continuation Sheet)

	CERTIFICATION
I certify that the foregoing is a complete stabankruptcy proceeding.	tement of any agreement or arrangement for payment to me for representation of the debtor(s) in this
October 3, 2024 Date	/s/ ROSANA MORENO RODRIGUEZ ROSANA MORENO RODRIGUEZ Signature of Attorney MORENO LAW OFFICE LLC PO Box 679 Trujillo Alto, PR 00977 (787) 530-1998 Fax: rmoreno@morenolawpr.com Name of law firm

United States Bankruptcy Court District of Puerto Rico, San Juan Division

	NOEL ANTONIO SANTIAGO FELICIANO			
In re	IOVASKA CLAUDIO VARGAS		Case No.	
		Debtor(s)	Chapter	13

VERIFICATION OF CREDITOR MATRIX				
The abo	ove-named Debtors hereby verify tha	t the attached list of creditors is true and correct to the best of their knowledge.		
Date:	October 3, 2024	/s/ NOEL ANTONIO SANTIAGO FELICIANO NOEL ANTONIO SANTIAGO FELICIANO Signature of Debtor		
Date:	October 3, 2024	/s/ IOVASKA CLAUDIO VARGAS IOVASKA CLAUDIO VARGAS Signature of Debtor		

AMAZON BUSINESS PRIME CARD PO BOX 1270 Newark, NJ 07101-1270

AUTORIDAD ENERGIA ELECTRICA PO Box 363928 San Juan, PR 00936-3928

BANCO POPULAR DE PUERTO RICO BANKRUPTCY DEPARTMENT PO BOX 366818 San Juan, PR 00936-6818

CITI CARDS CBNA PO Box 6500 Sioux Falls, SD 57117-6500

CITI COSTCO
PO Box 790046 Saint Louis, MO 63179-0046

CITI COSTCO PO Box 790057 Saint Louis, MO 63179-0057

CONSUMER FINANCE/SYNCHRONY BANK PO BOX 71783 Philadelphia, PA 19176-1783

CRIM PO BOX 195387 San Juan, PR 00919-5387

DEPARTAMENTO DE HACIENDA BANKRUPTCY SECTON 424B PO Box 9024140 San Juan, PR 00902-4140

DISCOVER PO Box 30939 Salt Lake City, UT 84130-0939

DISCOVER PO BOX 30943 Salt Lake City, UT 84130

DISCOVER BANK PO BOX 15316 Wilmington, DE 19850

FIRSTBANK PO Box 9146 San Juan, PR 00908-0146

HOSPITAL PAVIA SANTURCE DEPTO DE COBROS PO BOX 1137 San Juan, PR 00909 LUMA ENERGY PO Box 364267 San Juan, PR 00936-4267

ORIENTAL BANK PO Box 195115 San Juan, PR 00919-5115

PENFED PO Box 456 Alexandria, VA 22313-0456

PENFED CREDIT UNION PO Box 1432 Alexandria, VA 22313-1432

PERFORMANCE FINANCE PO BOX 5108 Oak Brook, IL 60523-5108

SYNCB/GENERAC CNSUMR FINAN PO Box 71757 Philadelphia, PA 19176

TRANSWORLD SYSTEMS, INC. 500 VIRGINIA DR SUITE 514 Fort Washington, PA 19034